

A Surgeon at Large

by the same author



THE HEALING KNIFE
A SURGEON'S DESTINY
SURGEON'S SYMPHONY
A RING AT THE DOOR
THE WAY OF A SURGEON
A TALE OF TEN CITIES
STRANGE CASES
A DOCTOR'S ODYSSEY
PATIENTS' PROGRESS
A SURGEON REMEMBERS
THEY COME BY APPOINTMENT
SURGEON UNDER CAPRICORN
THE LURE OF SURGERY

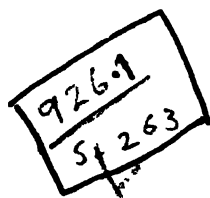
for children:

A BOY IN SAMARKAND
CAUGHT BY REVOLUTION
● FLIGHT FROM THE PALACE

A SURGEON AT LARGE

by

GEORGE SAVA



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Prologue



New Year's Eve

For me, as, I suppose, for many people, the very words 'New Year's Eve' are the key to the gate of a thousand memories. I have spent New Year's Eve in many odd places and sometimes in conditions that have given little cause for the hopes and aspirations that always come with this occasion. Mostly—overwhelmingly—my memories are happy ones, for the curious magic of the birth of a New Year banishes the trials and sorrows of the past and allows us, if only for the moment, to see the promise of the future. It is strange that this should be so, for the date on which we celebrate it is purely arbitrary and owes its being to nothing but the whim of a Roman emperor. Primitive peoples and astronomers observe it in March on the first day of Spring, a season full of hope, as December 31st, with the world in mid-winter, is not; and yet it may be that this contrast with Nature at full ebb, makes our hopes seem all the brighter and more golden.

A New Year that promises despair rather than a hope would seem to be a black one indeed; and it is because of that that I think New Year's Eve, 1919, will remain engraved on my memory when others have grown dim and faded. Yet it offered so much. My family and I had arranged to spend it together, which is surely the best way, for the frenzied junketings of mammoth balls and organized celebrations are surely out of touch with a season at

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which rejoicing should be leavened with reflection and there should be at least some moment or other when one may dedicate oneself to the future. My happiest New Year memories are of parties such as this. I was filled with foreboding, and my sadness infected the others. It did not make it any easier for me when I realized that I was the skeleton at the feast.

Indeed, it was a personal problem that was tormenting me—and one that related not to the past but to the future, which is the worst kind to have on one's mind at a New Year's Eve party. The prospect for the months ahead was black and menacing. Over that hung the dread thought that perhaps some of those months were not for me. For the first time in my life, I was driven to consider the end as something that might apply to me. As a surgeon I have seen death many, many times, and it never fails to affect me in its sadness and, too, its grandeur. But never before had death seemed something that might happen to me—something to which I must give consideration as a practical and not far distant possibility. Yet that was the situation I now had to face.

People were talking, but I did not hear their words. Instead, I was listening again, as I had in my mind's ear a hundred times during the past few days, to the voice of an eminent physician I had consulted about my health. He had spoken earnestly but not despairingly, and I knew he was the type of man to whose words great weight should be given.

'The position is simply this, Sava,' he had said 'If you don't ease up—and I mean really ease up—you won't last much longer.'

Not in themselves words of doom. There was an 'if' in them. But the physician was a man I respected. He was given to under-statement.

His diagnosis was what I had expected (though not perhaps in so drastic a form) when I had decided to consult him about my growing tiredness in everything I did, a

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tiredness that made a burden of things I had hitherto taken in my stride. My heart was beginning to complain of the strain I had imposed on it for so long. There was, it was true, no indication of actual disease. That wonderful instrument, the electrocardiograph, which electrically records the behaviour of the heart, had had no alarming report to make. But the heart was slowing, just as an over-tired worker slows at the end of a long and tiring day. If I continued to put it to even normal use, then breakdown might occur. A coronary thrombosis might develop suddenly—and then my end would be swift.

These were not pleasant thoughts with which to be absorbed at a New Year's party. At a time when one's imagination was automatically projected forward, it was dismal indeed to contemplate a life of inactivity. To one of my temperament, in fact, inactivity, abandonment of work, is nothing less than a sentence of death. Perhaps I would even prefer death. I could see no way out.

Those around me were near and dear to me, people whose happiness was bound up with mine, and though I did my best to turn their thoughts from my problems and forebodings, I knew that they were as concerned as I. And it was this joint interest, this common concern, that brought the Idea. I do not, to this day, know who suggested it. It seemed to come spontaneously to everyone in that mysterious way which makes one less inclined to dismiss telepathy and theories of the Group Mind.

Really it was an obvious suggestion. It was simply that I should go away from it all for perhaps a year. That I should indulge my love of travel. But this time there must be a difference. In the past few years I have travelled much, but there has been little holiday in it—rather the reverse. I have been lecturing, teaching, operating. And when I have returned to this country, there have been arrears in my practice to overtake. In fact, it was just this pressure which had brought me to my low state.

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At first I was reluctant to agree. I did not like 'giving in'—forgetting, in my protests, how often I have waived away that attitude as irrational when my patients have urged that they cannot leave their work. I found it difficult to imagine three months without surgery, let alone a year. But in the end, I consented. The act of consent in itself brought relief. For good or ill—how was I to judge?—a decision had been made, and any decision is better than uncertainty.

So it was that, for a time, I became a Surgeon at Large. I was to forget I was a doctor. I was to stay away from hospitals and clinics and medical schools. In short, I was to give myself a Sabbatical Year.

The chapters that follow are the story of that year. They will show, as might be expected, that it did not turn out quite as we imagined it would, and that the ideal of 'getting away from it all' can never be more than an idle dream in our shrinking world. But it was a year worth spending. From it I learnt much—which is why I have set down the record of it here.

January



A decision not acted upon promptly is often a decision that might never have been made. I lost no time in trying to put my New Year's resolution into effect. It seemed easy enough on the face of it. I was to go away—that was all. No need to seek for appointments in advance, no need to make arrangements of any kind; my purpose was to travel hopefully, like Stevenson, and where I arrived did not matter in the slightest degree.

But the wider the choice open, the greater is the difficulty of choice. In the past my travels, even when ostensibly for recreation, had always been bound up with my profession; sooner or later my aim was to reach some hospital or university where I could teach or learn. Now, with no such guide, I found some difficulty in making up my mind. I was obtaining a first glimpse of the difficulties that beset those in the modern world who hope to escape from familiar things.

In the end an old idea, one I had often played with in the past, returned to me—and it had the advantage that it would not make an utter break with all I had been used to. I have always had an ambition to serve for a little while as a ship's surgeon, not on some crack liner, but on one of those sturdy ships that, almost unnoticed, are the backbone of the world's trade. Perhaps my training, so many years ago, at the Russian Naval Academy has left in me the germ of an ambition I have still not realized.

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For my present purpose the scheme appeared ideal. On a cargo boat I could, if I wished, virtually disappear. I would be among people whose way of life would be as strange to me as mine was to them, in a new world full of exciting possibilities and novelties. And if someone urged that this was not fulfilling my resolution, that I should still be concerned with a doctor's job, the reply was obvious: unless wreck or some other catastrophe occur, a ship's surgeon has practically nothing to do beyond binding up minor cuts and injuries and giving a soothing dose to someone with a touch of dyspepsia.

Yes, it seemed ideal, from whatever angle one looked at it; and when in response to my very first inquiry I received a most attractive offer, it seemed as though the gods were working in my favour. A shipping company in Liverpool was willing to sign me on as surgeon on a steamer shortly to leave for the Pacific Islands by the long route via the Cape of Good Hope. There was only one difficulty—I had to be ready to sail by January 7th, less than a week ahead. It was short notice with a vengeance, but long enough for me. Perhaps as a reaction from despair, I was only too anxious to leave and take the plunge into the unknown. Anything would be better than sitting idle and more or less helpless among familiar scenes.

At once I wrote and accepted the chance—and almost at once a reply came back to tell me that sailing had been delayed. There was some difficulty about the cargo. It was a commercial matter, to do with exports and deliveries, that I did not understand and did not want to understand. My only interest lay in the date. How soon? I asked. Perhaps a week, the company replied. I waited. There came another letter announcing a further delay. No date could be given, and it might be that the voyage would have to be postponed indefinitely.

My heart sank. It looked as though that first bright smile from Fortune had been no more than a confidence trick. But I could not wait. The longer I remained in

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England, the more I would feel the pull of my work, and, willy-nilly, I would find myself drawn into commitments from which I could not escape. Slowly but inevitably I would be drawn back into the old daily round, and my shining New Year's resolution would go the way of most of its kind, little more than stillborn.

Now, too—though it may have been a case of wisdom after the event—I began to ask myself whether this was not a blessing in disguise. For my aim was escape into freedom of all ties; and if I went as a ship's surgeon, the fact remained that, however light the work and however pleasant and leisurely the voyage, I would still be a company's servant. It would be better, I decided, and my family agreed with me, to be entirely independent, to travel as an ordinary man and forget, for the time, that I had ever had anything to do with medicine or surgery.

I could go for a cruise. I could travel here or there in a liner. The ideas did not appeal. In either case I would be for some considerable time brought into contact with a single group of people, and, whether I liked it or not, my past would come out. A word here, a hint there—it would be enough to establish that I was a doctor. And I know only too well from long experience that there is no-one less able to forget his profession than a doctor on holiday. Everyone has a case to discuss with him, the memories of an operation to recall.

So, in the end, I decided to fly—anywhere. There is little enough time on even the longest air-trip to grow intimate with one's fellow passengers. It would be possible, I decided with the hope of inexperience, to preserve an incognito for a few days when it would be impossible to do so for a week. The decision made, action followed at once. I bought a Round-the-World ticket from one of the world air-lines. On January 13th, I was *en route* for Australia.

My friends sometimes chuckle softly at me for being, as they think, superstitious. But I assert that I am not a superstitious man. If I sometimes carry with me a small

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mascot that someone has given me for luck, it does not mean that I think it has any power, though it could be that the memory of a friendly gesture may give me hope when I most need it. So, when I say that I could not help wondering whether the fact that I had set out on the thirteenth was ominous or not, I would not be misunderstood. The most rational of us avoid passing under ladders if only because of the pot of paint aloft—or that is how we explain our action. And it may be that, unconsciously, I was beginning to doubt the wisdom of my abrupt throwing up of anything and setting out to fly round the world with no objective in view—and found in the ‘unlucky thirteenth’ a scapegoat for my own misgivings. Nevertheless, looking back on it now, I do sometimes feel that perhaps it would have been better if I had avoided the date that has so long been regarded with suspicion, if not horror.

But fears and doubts were soon forgotten. The air-liner was not the place for them as she made her way, swiftly and confidently, southwards and eastwards, and when we made our first halt at Rome, even the most superstitious would have lost his faith in omens. For here was sunshine, the bright, happy sunshine of the Mediterranean that explains why the Mediterranean peoples are so ready to take things as they come and regard the passing moment as the best of all possible instants in eternity. After the grey monotony of January in England it so captivated me that, for a few minutes, I played with the idea of breaking my journey and remaining to enjoy it amid the splendours of the Eternal City. Why not? I was travelling to please myself, to indulge a whim. But it was too near home. I had friends in the city who might find me out. When, a little later, the plane resumed its flight I was again in my seat, staring down out of the porthole at the blue Mediterranean below and already feeling that the shadow was beginning to lift from me.

We stopped at Cairo to spend the night, and I, at least, to whom air travel is not the most inviting of all, was glad

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to know that for the next few hours I would have my feet on good solid earth. For the long-distance air-traveller, these first overnight halts have a special significance. It is not simply that one returns to earth from the rarefied upper air and the world resumes a more normal perspective. They have the human quality of enabling fellow-passengers to take stock of each other, to break down the reserve that has prevailed till then high above the clouds. It is easier to make friends, to sum people up, even to form likes and dislikes, in a hotel lounge than it is in an air-liner. One judges people largely, though unconsciously I think, by their behaviour against familiar backgrounds—and there must be very, very few people, outside the staffs of the air-lines, to whom an aircraft cabin is a wholly familiar background.

My fellow-passengers were the usual mixed bag: an officer returning after leave to some station out East, a few business men, identifiable at once by their determination that nothing should separate them from the brown hide brief-cases, an Australian wool-farmer going home after a visit to England, and one of those mysterious Government officials without whom no air passenger-list is complete. I had seen all these types before on previous flights, and I saw no reason why I should fear that I might unburden myself to any of them. With men such as these, conversation need never go beyond generalities; one's acquaintance with them rarely goes beyond the drink-at-the-bar level.

The two women in the party, however, attracted my interest at once. They were obviously unused to air travel—and as obviously Australian. And they taught me—though, of course, unintentionally—how hard it was going to be for me to preserve my anonymity. I was determined, as I have insisted from the start, that I must forget all about my profession. There was nothing in the passenger-list that gave a clue to it. I was just a man taking a trip to Australia to recuperate from a period of strain and overwork.

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Yet it was my professional eye that drew my attention to these two women and aroused an interest I had resolved I must not allow myself. The elder of the two was, I should say, in her late thirties, the younger some five or six years less. It was the latter who set me speculating. She was by no means unattractive, and her almost black hair and a certain quality in her features suggested she might have Irish blood in her. I could imagine her, in other and more suitable surroundings, being animated and even mischievous, the perfect guest at a party.

These were not the right surroundings. Nor was the mood right. True, she was animated, but it was in a different way, a way that made me study her as best I could without being downright rude. Her face was flushed. She had a certain brittle air about her, almost as though she were in fever. Yet she showed no other signs of illness. It might, of course, simply be excitement on her first long air-trip, or at the prospect of returning home. It might indeed, for if my guess about Irish ancestry was right, she could easily be emotional. But I did not think that was an entirely satisfactory explanation, and already I was starting to form theories and conjectures. I brought myself up with a jolt. This would never do. In a moment or two I might start asking her questions. . . .

As though to remind me of the risk of discovery I was running, I found myself, without knowing how, exchanging some idle conversation with them. They were as charming as they looked. With a frankness that I did not fully return, they told me they were going home to Australia, that they were sisters-in-law, the elder having married the younger's brother, and that they had travelled to England by boat, but were flying back just for the experience, which they were finding even more exciting than they had thought. Vaguely I told them I was going to Australia to see friends (whom I did not name) and that I was just recovering from a breakdown.

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'Oh!' exclaimed the elder, whose name, I gathered, was Betty. 'So's Moira. . . .'

The younger shook her head and frowned.

'Don't be so silly, Betty,' she said sharply, but not unpleasantly. 'I haven't had a breakdown.'

The conversation flagged and they moved away, leaving me wondering. I prided myself, with little foundation, on my ethnological acumen. I had guessed the younger woman to be Irish, and I had learnt her name was Moira, which is an Irish name. They had confessed themselves excited at their first air-trip. My guess there had been right—or was it? Moira was now the other side of the lounge. No, I decided, after a quick glance, sheer excitement could not produce a state quite like that. And if it was not excitement, what was it?

I shrugged my shoulders and turned as another passenger spoke to me. It was none of my business anyway. Certainly if I was going to trouble my head about the hypothetical illnesses (which might not be illnesses at all) of strangers, I was not going to have much of a holiday away from it all. And when we took off the next day I had almost forgotten about it.

At Colombo, where we made another overnight stop, I noticed them again. They were as delighted with all they saw as ever, and Moira appeared much more normal. The high colour had grown less. I cursed myself for being an imaginative, interfering fool—and reminded myself that her state of health was none of my business, and that her sister-in-law looked quite capable of taking charge of any emergency that might arise.

Our fourth and final halt was at Singapore, and the next day we set out on the last stretch—the eight-hour oversea crossing to Darwin. It was a perfect day, and I felt that I really had flown into summer and left behind not only the gloomy skies of England but also the winter of my discontent. My thoughts grew more cheerful. I began to realize that, after all, I was not yet an old man, and

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there was a good way on the road of life for me to travel yet.

I was so absorbed in marvelling at the play of the sunlight on the sea below and rejoicing at the miraculous change that had come upon my spirit that I failed to notice for a time the stir that was occurring in the cabin. It was a full complement we had brought from Singapore. All but one seat in the plane was occupied—and every one of those people, except me, was staring towards the forward compartment. Necks were being craned, and strangers were exchanging questioning glances, as they will when something unexpected has happened. But whatever it was it could not be impending disaster to the plane. It was flying smoothly, almost defiantly through the clear air. And if further reassurance were needed, it was to be had in the sight of the captain himself standing in the gangway. He would not be there, I told myself, if a flight emergency had arisen.

He kept glancing towards the rear of the cabin, and presently the stewardess, an extremely competent young woman, came hurrying forward. In her hand she carried a small plate, and on that plate, I noticed as she passed me, were several tablets. They were obviously medical tablets of some kind, but what neither I nor anyone else could have said at a casual glance.

But the sight of them was sufficient to quicken my interest. Someone had been taken ill. Almost instinctively I started to rise in my seat and words automatically began to form on my lips: 'I am a doctor. Can I help you?' Second thoughts forced me down again and the words died. Why should I worry? I was on holiday, a patient myself, trying to forget all about doctors and doctoring and sick people. Besides the stewardess was very capable. The first officer himself had told me she was a trained nurse. A sudden attack of sickness perhaps. One of those little qualms to which even the most hardened traveller is subject on occasion.'

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I tried to look at the waves again, fifteen thousand feet below. For some curious reason they no longer fascinated me. Perhaps a cloud had dulled them. I do not know. My thoughts turned again to whatever was happening in that forward cabin. Real emergencies can arise in a very short time, and unless promptly dealt with can prove fatal. It would be terrible if I discovered that my desire for anonymity had led to the forfeit of a life. . . . And there were some emergencies that not even a trained nurse could adequately deal with. . . .

When the stewardess came hurrying back again, her face as grave and worried as any woman's well could be, I rose.

'What is the matter?' I asked, unable to quell my instincts any longer. 'Can I help?'

It was queer that even then I did not take the obvious course and tell her outright I was a doctor. A little reluctance remained.

'No, thank you,' she replied a little curtly—which is unusual in a stewardess, and showed how upset she was. 'What we want is a doctor.'

'I am a doctor,' I said quietly. And to prove it I handed her my card.

Rarely have I seen such a look of relief as passed over that harassed woman's face. She grabbed my arms as though she were a child frightened in the dark and I was a parent come to the rescue.

'Oh, thank God!' she exclaimed. 'Come quickly, please.'

I followed her into the other compartment, taking no notice of the very curious glances that were being cast at me.

The moment I glanced at the patient, I realized that there had been every cause for the stewardess's state of anxiety that bordered on panic. Lying back in her seat was Moira, the young woman whose appearance had attracted my attention when we had stopped at Rome. But now there were no signs of unnatural animation, no flush, no suggestion of a human being keyed up to a

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febrile pitch of excitement. For Moira, her face a leaden pallor, looked a woman *in extremis*, if indeed she was not already dead.

'I think,' said the stewardess cautiously, 'it's some sort of internal hæmorrhage. Mrs. Chivers, her sister-in-law, said she was subject to it.'

I nodded. It looked a likely explanation. But explanations could wait. The pressing problem of the moment was how to deal with the situation and bring some sort of life back to the stricken woman—if anything could be done. For I could detect none of the more usual signs of life. She had no tangible pulse. I could not hear the sound of her heart. Nothing but the most shallow of respiration showed that a small spark of life still glowed.

'She ought not to have come at all, doctor.'

The voice, a little broken, brought me back abruptly from my thoughts. It was the sister-in-law, Mrs. Chivers, whom till then I had known only as Betty.

'She was undergoing treatment, and wanted to return home. The doctor said it might be fatal. He wanted her to take a blood-transfusion outfit with her. She wouldn't. But she brought some blood.'

The words had come monotonously and I had paid little attention to them, but that word 'blood' caused me to look at her sharply.

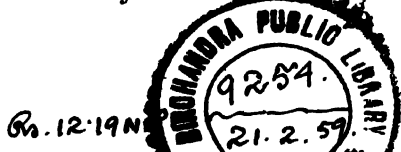
'Where is it?' I demanded. A blood transfusion was the one thing that might save her. So much had been obvious from the start—but how—how, I had been asking myself desperately, does one obtain blood and make a transfusion fifteen thousand feet above the ocean? And here, suddenly and dramatically, had come the answer.

Mrs. Chivers glanced at the stewardess.

'I asked you to put the flask in the fridge,' she said.

The stewardess started. 'But I didn't know it was blood,' she muttered. 'You should have told me.'

When she returned with it—there was about a pint—I was ready with a fresh problem. I had brought nothing



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with me in the way of surgical and medical equipment. My aim had been to have nothing to do with such things, and only the unkindest of Fates had forced me into action in this, the most unlikely place in the world. Was there anything on the aeroplane?

The stewardess nodded. There was an emergency kit. After all it was essential. The captain, who had been an interested, though worried spectator, brought the box from his locked cupboard. A quick glance showed me that there was a small knife with which I might be able to open the vein, but there was no syringe of sufficient size to use for the transfusion. I held a hurried conference with the stewardess and the captain, and between us we managed to rig up a transfusion apparatus consisting of a bottle and a tube, which would have been instantly condemned by the worst hospital and the worst surgeon in the world. But it had to serve.

Without a doubt, that was the most macabre of all the many blood transfusions I have had to give. There was no way in which we could shield the patient or give her privacy, and what I did I had to do in the full view of the passengers, some of whom were openly excited and interested, while others looked as though, in due time, they would need revival themselves. I had no anaesthetic, but I hoped that the woman was sufficiently unconscious not to notice the slight pain involved in opening a small vein in the arm. True, there was some morphine in the captain's emergency box, but I dared not use it on a woman so far gone as Moira was.

There were many precautions I ought to have taken but could not. Under the best of conditions, a transfusion would have offered only the slightest hope on a patient so low in condition. Under these circumstances, it was a gamble of astronomical chances against. But, as winners of football pools know, such chances do sometimes occur. Whatever the risks, however remote the hope of recovery, it was clearly my duty to take them.

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Closely and scarcely daring to breathe we watched as the blood dripped slowly into the vein. There was scarcely a sound in the cabin, and the second-pilot, acting on the captain's orders, had climbed to seventeen thousand feet where the air was less bumpy. Somehow or other, he kept the air-liner as steady as a substantial floor.

The pint of blood was half gone before there were slight signs of revival. She stirred a little, moaned slightly, and her eyelids flickered. From that point she progressed rapidly and managed to whisper that she had been kept alive on blood transfusions.

Already I could hear murmurs behind me. To onlookers, even to the stewardess, it must have seemed that the crisis was past and that a life had been saved. But those whispered words had alarmed me still more. They gave me the clue to her condition—and also they indicated that a mere pint would be quite insufficient to restore her enough to last the six hours or so that still lay between us and Darwin. I had the tantalizing vision of being defeated even now, when, for a moment, victory had seemed to lie within my grasp.

A near-miracle had provided me with a pint of blood. Nothing but a complete miracle, surely, could bring more. Yet I had to make an attempt of some kind.

I turned to the passengers. Some were staring out of the portholes, trying not to see what was going on. A woman was chewing the corner of her handkerchief and seemed on the point of hysterics. But some had remained calm. It was to these that I addressed my words.

'I must have more blood to carry on the transfusion,' I said seriously. 'It is the only hope of saving this woman's life. Tell me, has any of you ever been a blood-donor?'

For a space no-one spoke. I began to think my last hope had failed me. In the bottle, the blood was almost three-quarters gone. It was the eleventh hour. Then, when it appeared that, at this last moment, Fate had turned against me, a young man half smiled—a little wryly—

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and stepped forward. I learnt afterwards that he was a lawyer returning from England, where he had been studying the working of the English courts.

'Yes, doctor,' he said quietly. 'I gave a pint or two when I was in England. It seemed one way of repaying the kindness I'd had. I was Group O.'

My dying hopes sprang to life again. He was an intelligent young man, and he was not likely to be mistaken in the grouping of his blood. But I had to make sure. If he was Group O, there was still a chance—if I could move quickly enough. Group O, as I suppose most people know in these days, is the only one of the four main blood groups that can, in emergency, be safely transfused to another person, no matter what the latter's own blood may be. But we know today that even Group O can produce undesirable reactions when mixed with other blood. A test had to be made.

The young lawyer allowed me to withdraw a sample, and then I had some more improvising to do. From one of the business men I borrowed the glass of a large pocket watch that he wore. Another passenger, who turned out to be an enthusiastic naturalist hoping to study insects in Queensland, supplied me with a high-power pocket lens. On the glass I put a drop of the lawyer's blood and another of Moira's and teased them to mix with a needle—obtained from the stewardess. Through the lens I watched anxiously, timing myself by the now glassless gold watch of the business man. When five minutes had gone and there was no sign of agglutination, I heaved a deep sigh of relief. I knew that my rough test was by no means certain—that, for instance, a higher-powered microscope might have shown the dreaded signs. But the risk was small and in those pressing circumstances it could be neglected.

By now, the bottle was almost empty, and I worked as fast as I knew to obtain fresh blood from the lawyer. I was not gentle, but he did not complain. And so, by drastic measures, each one adding to the risk of failure, we kept

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the blood flowing into Moira's vein till altogether she had had just over a couple of pints.

The crisis was over. As she lay back in her seat, there were signs of life in her cheeks; her pulse was detectable; and she smiled at me wanly, though I checked her effort to speak. With luck, she would last until we could get her into hospital at Darwin.

It was not until, having left her in the care of the stewardess and her sister-in-law, I had returned to my own place that I realized how great a strain it had all been. I was bathed in sweat and my hands trembled a little. I felt limp and exhausted.

Now that the tension was over, excited talk broke out all round me. Some offered me congratulations, to which I paid little heed; others discussed the affair in all its aspects. It was this which revived me to a sense of reality. For as these people talked, so I grasped that what had happened threatened to destroy all my hopes of arriving in obscurity and going my own way without comment. This incident, for all its tragic implications—or because of them—was naturally something which every one of these fellow-passengers of mine would want to relate to their friends. It would be a good story, a good enough story, in fact, perhaps to be noticed in the Press. If I entered Australia in a blaze of publicity, my whole plan would be ruined at the outset.

At that moment, I must confess that I thought more of my own affairs than of my patient, for whom, indeed, I could do little more. When the stewardess came along a few minutes later to report that Moira was resting peacefully, I told her I would like to have a private word with the captain. She nodded and went away—and returned to invite me into that holy of holies on an aircraft which flying-men call 'the office'. The second-pilot was still at the controls, and the captain was waiting to receive me.

In a few words I explained my anxiety to him, and he nodded sympathetically. But, he explained, it was a

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difficult problem. He would have to make an official report on what had occurred. An investigation might have to be made in London to discover how it came about that a passenger in so critical a condition was allowed to travel without proper attendance. But, I protested, there was no need for the Press to know, and the still more pressing question to my mind was how to stop the passengers from talking immediately on arrival. If there could be a few days' grace. . . . He promised to see what could be done.

I have a great admiration for the men who fly the world's air-liners. I have travelled a lot with them and I have never known them unequal to any emergency, from a serious one of flying to difficulties raised by a trying passenger. And this one proved no exception to the rule. He spoke to the passengers each individually, no small task in itself with so full a plane. He put it to them that he thought all would like to make some recognition of what I had done, and there was nothing would please me more than that they should hold their peace for a few days after landing, and he added that I was myself a sick man unequal to facing any sort of publicity or fuss. So eloquently did he talk that all gave an undertaking of silence, some grudgingly and others willingly. It was a grand piece of work.

My own problem solved as far as it might be, I returned to my patient. She was surprisingly recovered now and inclined to talk. Keeping her under close observation I allowed her to do so, for she seemed so anxious to tell me something that I thought it better not to refuse. Thus it was that I learnt the background of this strange and alarming case.

For some months past, Moira Chivers had been under treatment in London for one of the most dangerous of diseases—leukaemia, a condition in which the white corpuscles of the blood multiply at an alarming rate, crowding out the red corpuscles and so robbing the whole body of nourishment. One treatment for this state, which is very dangerous to say the least, is to give frequent blood

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transfusions, so that the diseased blood—for that is what it amounts to—is replaced by good, healthy blood. It does not long remain so, however, for the white corpuscles continue to multiply, so that the fresh blood eventually becomes similar to that which it replaced, and then the process has to be repeated.

This is what she meant when she had whispered to me, in her agony, that she had been kept alive on transfusions, which was the literal truth. She recognized the seriousness of her condition, knew that in the end it might kill her, but she took it calmly. Her life had been short, but it had not been unhappy, and above all she had been able to visit the little village in Ireland from which her mother had emigrated many years before. But she still had one ambition; she wished to return to Australia so that, when the inevitable end came, she could be among her own family and on her own native soil. It was this overriding wish that had caused her to defy all her doctor's warnings that she must not do so, unless she was prepared to travel with a medical escort. This, too, she refused. She felt it in her bones, she said, that she would reach her home if only in time to die there; and that was enough.

It was an affecting story, which she told with complete sincerity and simplicity. Never once did she try to excite pity or sympathy. She had been singled out for this terrible blow, and she was resolved to bear it courageously. And then, in the same matter-of-fact manner, she gave me her home address and the name of her brother. I had done a very great thing for her, she told me; it was the greatest service any man could have performed to ensure that she reached Australia alive; and would I please send my account to her brother?

As she spoke her eyes glowed with gratitude that I felt I was not altogether entitled to. She looked a transformed woman. With a slight smile, I shook my head.

'No,' I said, 'there is no question of an account.'

'But, doctor;' she protested with some heat.

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Again I shook my head. 'Now whatever you do, you must not excite yourself. This isn't a matter in which any question of a fee arises. I am taking a holiday away from all things professional,' I went on, hoping I kept the irony out of my voice, 'and what I was able to do, any other doctor would have done if he'd been faced with that situation. Besides,' I added, 'I've already had my reward.'

'I'm afraid I don't quite follow. Your reward?'

'Yes,' I said. 'If you could see the look of gratitude in your eyes you would understand that that is more than sufficient reward for any man. Let's leave it at that, shall we?'

She smiled at me and pressed my hand.

At Darwin I saw her into hospital and as soon as I could continued my journey. Every moment I expected a storm of publicity to break about me. I dreaded opening the paper at my breakfast table. But nothing came—not until I was far away from Darwin. The captain had done his work well.

I had been doubly lucky. Never before had I known luck to be so firmly on my side as during that affair in the airliner. And I had been lucky, too, in being among people who were prepared to keep a gentleman's agreement. But it had been a narrow escape. The omens were not at all propitious for my plans of rest. I was finding that it was not so easy to forget I was a doctor and deny all those obligations which, in a life-time, had become second nature to me. Perhaps after all it would have been better to have waited for that tramp. . . .

There is one other thing I must mention to complete this story. At Darwin when we landed I was concerned first of all in making arrangements for Moira to be taken to the hospital. When that was done, I looked round for the young lawyer, to thank him once again for enduring so much so gallantly. But he was gone. He, the real hero of this affair, if ever there was one, had quietly slipped away and disappeared. To this day, I have never discovered his name.

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Australia, so the reference books tell us, is the largest island in the world and also the most sparsely populated continent. With an average of less than three people per square mile of its enormous area, as compared with the overcrowding of some eight hundred into each square mile of England, it seems an ideal place for anyone who wishes, as I did, to disappear awhile from the haunts and activities of men. But reality, as usual, is very different from the appearance. Perhaps, of all places in the world, Australia offers least to the would-be hermit—unless he elects to be parachuted into the desolate interior, where life is almost impossible even for the aborigines.

For the very sparseness of Australia's population leads to an absorbing interest by the Australians in their fellow men. This is true of the big cities, like Sydney and Melbourne, which between them accommodate almost a third of the total population. In the smaller places, this interest is heightened to an extraordinary extent, and any stranger or newcomer must be prepared to become a cynosure, at all events for a time.

I suppose I should have realized all this, and that, for my purpose, I was doing the worst possible thing in choosing to visit a small, remote town. No doubt, if I had not been to Australia before, I might have preserved my incognito, as I wished to do. But unfortunately on my previous

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trip I had caught some of the limelight. I had broadcast. My name was not unknown. My books, too, are read in Australia—and the more remote a community, the more likely it is to read. It was not very long before everyone knew that the 'well-known writer and broadcaster' was in the town. Of course, the writer was identified with the surgeon. So it was that I found myself receiving the attentions that are given to celebrities everywhere, but here on a scale that I would certainly not have enjoyed (or suffered) in a larger city.

The immediate upshot of this most undesired state of affairs was that I received an invitation from the local Guild of Writers to give an informal talk. I demurred. I had no wish to make public appearances of whatever kind. Lecturing, even to a small audience, can impose the kind of strain that I was, above all, anxious to avoid. Yet, in spite of these weighty considerations, I could not very well refuse. Hospitality of a lavish kind had been bestowed on me. If I had been a foreign envoy visiting a country particularly anxious to win the friendship of the one I represented, I could not have been accorded greater favour and respect.

In the end, therefore, I had to give in. But I made one stipulation: I insisted that whatever I said or did must be off the record. There must be no reports in the local Press. For I knew that what appeared in the local papers might well be considered news in the larger field and appear in other journals published thousands of miles away; and then all my dreams, already fading, of being left to my own devices would vanish completely. The secretary promised he would do his best. But he pointed out, with truth, that Australia was a free country and no-one could guarantee to gag the Press, if it felt inclined to print a story, any more than news could be suppressed in England. Yet practically all the newspapermen were members of the Guild, and he felt sure that if my wishes were made known to them and the reasons for them were explained, they

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would be respected. On his promise to lay my case before the Press, I gave my final consent.

No doubt all would have gone well but for my love of telling a good—and true—story. I had not intended to tell the story; in fact I had almost forgotten it, and it flashed back into my memory during the course of discussion which followed my talk. It had such far-reaching results in altering all my plans that it is worth recounting here.

I had mentioned, in my talk, how inadequate unvarnished truth is in writing fiction, pointing out that the perfectly true story set out in the form of novel all too often looks improbable, if not impossible, and that this curious effect is particularly noticeable where coincidences are concerned. Everyone knows that strange coincidences and incredible events do occur in normal life and at the most unexpected moments; but let the writer have them printed and he is immediately set down as what used to be called a drawer of the long-bow and is today described, somewhat more vividly, as a line-shooter.

This point turned up again and again in the discussion, and at last I was challenged to recount some true happening in my life that I felt sure would lead, if published, to my being described as a modern Baron Munchausen. It was then that the story leapt into my mind—and my fate was sealed.

It had happened some little time before I left England, and, as these things do, it had started off prosaically enough.

Over dinner one evening, a friend had told my wife and myself of a wonderful house that had just come into the market. It was remarkable for its architecture alone, for it was a very fine specimen of Georgian at its best. But there are other houses in the country at least as good in that respect, and this one based its claim on its magnificent interior. The rich American who had lived in it and now wished to sell it on his return to his own country, had gone to enormous expense to have it modernized on the most

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lavish scale, and as a result it had features that were probably not to be found in any other house in Great Britain. Among its features was (as might be expected) a superb bathroom, with the bath sunk below floor level and the whole place equipped in a way that would have made even a sybaritic Roman envious.

So ably did our friend describe the place that, there and then, we decided we must see it, especially as he said that that could easily be arranged. Of course, it was nothing but curiosity that prompted our resolve; though we were house-hunting, magnificence of this kind was not what we sought, even had we been able to afford the tremendous price the American wanted. It was arranged that we should all go together the following Saturday afternoon, the only time I could spare, for I happened, at that period, to be very busy.

Now if I had been free at any other time, the peculiar series of events that followed would never have occurred. For it turned out that Saturday afternoon was far from an ideal choice. It was true that our friend had done all he could and had secured the necessary permit from the agents. The keys, he said, were with the gardener, who lived in a small cottage in the grounds, and showed people over when necessary. Without difficulty we found the cottage and its pleasant occupant, a fine, elderly man who had obviously spent all his life out of doors.

He shook his head despondently, explaining that because so many mere sightseers had bothered him at weekends, he had insisted that the keys should be taken from him on Friday night and not returned till the following Monday. He refused to be responsible otherwise. It had been arranged, however, that if genuine visitors wished to see the house, the agents would provide the keys.

There had obviously been some breakdown in the staff work somewhere. Disappointed we turned to the car when he offered to show us over the grounds—and it was so clear that he regarded the grounds, his own particular

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preserve, as so much more worth looking at than the house, that we could not refuse him. Certainly they were worth seeing.

As we passed the rear door of the house, I glanced up at it regretfully. It seemed so stupid to have come this distance and to be thwarted like this.

'We'll just have to put up with it,' remarked my friend, who, I could see, was feeling a little embarrassed by the outcome, which he regarded as his responsibility. 'Perhaps you can arrange some other time, and I'll get things fixed properly.'

I nodded. It was then that the peculiar events began to happen. While he had been talking I had absentmindedly taken out my bunch of keys. Barely conscious of what I was doing I selected the largest on the ring—the key that happened to be that of my own backdoor—and slipped it into the lock. To my utter astonishment, and to a chorus of amazed cries from the others, the key turned and the door swung open.

The gardener scratched his head and nodded sagely.

'I never did trust them fancy locks,' he said darkly. 'I allus said there ought to be someone inside to draw the bolts.' He glanced at me. 'Seeing you've opened it, sir, we'll go in.'

I was too dazed by the astonishing coincidence that the key of my own backdoor, which had nothing special in the way of locks, had operated this 'fancy one' that for a few moments I hesitated on the threshold. But the others pressed forward and I followed them, eager now to see the sights. They were worth seeing. Here was magnificence of a kind that is rare in England today, and, of course, the bathroom was most impressive. Yet my own reaction, at least, was that for one accustomed to English reticence, this house might be a little overpowering to live in; but that is by the way.

We passed into the library. Here, the gardener told us, pictures usually hung, but they had all been taken down

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and stored in the special safe let into the wall. He had not the key to that. There were only two keys in existence, one with the owner himself, the other at the bank. We asked him what the pictures were, but he shook his head. He didn't know anything about such tack. . . .

Once more, and quite unconsciously, I had thrust my hand into my pocket, I had nothing at all in my mind. My hand encountered a small key. An ancient Chinese bronze key, though I could not be sure that it had ever been made to fit a lock, for it was only a mascot, given to me for luck, by a patient, and I had slipped it into my pocket, where, till now, it had lain forgotten. Just as I had earlier, I slipped the key into the lock. To my amazement—indeed, to my horror—it turned easily and the door in the wall slowly opened.

Every one of us was too flabbergasted to utter a word. We could only stare fascinated at that leisurely swinging door. It was the gardener who first recovered his wits. He sprang forward and pushed the door to, so that the automatic lock snapped tight again. And he was a very startled and troubled man.

'I'm sorry, sir,' he said firmly, 'but I'll 'ave to ask you, with respects, to go. This is a bit beyond me, sir, and I daren't take no more risks.'

There was a distinct change in his manner. I think now he had come to look on me as some superior kind of cracksman with a genius for opening the most difficult locks; and the possible results of having shown such a one over the house alarmed him. He refused point blank all our entreaties to let us see the cellars and the basement. No, we must go at once. Go we did.

It had been an incredible affair, and it gave us plenty to talk about for the rest of the day. That my door-key should have fitted was not, perhaps, so very surprising; but that that bronze charm should have operated a specially made lock was beyond belief, and only the assurances of my wife and our friend persuaded me that it was

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not all some fantastic dream. There was, too, a more serious side to it. If my keys had worked, then it was not at all unlikely that other keys might. This was something that the owner should know about. Our friend suggested I should ring the American next morning, Sunday though it would be, and give a full explanation. No doubt the gardener-caretaker would report, and, apart from anything else, it would be well to let the owner know that we were not, after all, a band of crooks looking for an easy crib to crack.

When I telephoned, the owner had already heard the gardener's version. I could hear the relief in his voice when I explained exactly who I was, and he suggested that, if I could, I should motor down to the house that very afternoon and give him a demonstration of my magic keys. Like me, he was prepared to give no very great importance to the door-key. It was the Chinese bronze key that fascinated him. He assured me that the lock had been specially made by a very famous firm of locksmiths, one that had, in fact, been specializing in such locks.

On acquaintance, the owner proved to be an exceptionally attractive man, and he was all agog to see me get to work. Rather reluctantly, I inserted my door-key into the lock. I pushed gently and twisted the key, noiselessly the door swung open. The owner chuckled.

'Well, what do you know?' he said. 'I'll have to fit a new lock right away.'

But for all his geniality, I could see that he felt rather put out and was beginning to look on the whole affair as a rather elaborate practical joke in far from the best of taste. When the gardener, who was with us, swore solemnly that it was beyond him, and that he had never seen me before that day, the American's manner recovered its affability.

There was now the demonstration on the safe to be made, and I followed the owner slowly into the library. And this time the unexpected happened. That bronze

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key slipped into the lock, it was true. But beyond that there was no suggestion that it ever would work or ever had. He shook his head.

'Maybe,' he said, 'the magic is off with me around—and that's not a reassuring thought.'

The party broke up. If we had been mystified the evening before, we were now utterly in a fog. For those of us who had been present on the first occasion had seen those two keys open locks for which they had never been designed—and each of us had also seen the complete failure of the bronze key.

That was my story. I am well aware that in writing it in detail here I have proved, only too well, the point I wished to make at the meeting of the Guild. In print, that story looks utterly incredible, and its narrator must appear as a man who unhesitatingly sacrifices truth to his imagination. Yet it does happen to be true, and there do happen to be witnesses—one of them, the gardener, a complete stranger—who can vouch for it. To this day, it remains for me beyond explanation. Engineers tell me it *might* happen so, and mumble about skeleton-keys and thousand-inch clearances or something of the sort, but I think in truth they are as much at a loss as I am. It is, in the current colloquialism, just one of those things.

Whether my Australian friends believed it, I cannot say. But there was no doubting that they looked on it as an exceptionally good story. In fact, it was too good a story, for its possibilities as news were irresistible to the journalists present; and looking back on the affair in cold blood, I cannot altogether blame them. The story appeared, almost verbatim as I had given it, in the local papers. It was published, a little later, in one of those weighty Sunday editions which the principal Australian papers put out.

When I saw this, I sighed. There could be no incognito, no rest, for me now. It was not simply that my professional friends would all know I was in the country and would,

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no doubt, wish to see me—and, almost as inevitably, discuss professional matters with me, which was what I desired to avoid. The story itself had given me a new and wholly unwelcome notoriety. Correspondence on the affair began to appear in the papers, readers trying to cap my experience with others of their own.

It was unnerving and distasteful to me. Never before had I cursed my errant tongue so heartily. But worse was yet to come. I had not yet realized to the full just how much notoriety had come to me. It came, characteristically enough, just when I was beginning to think that the fuss had died down and that I might regain a little peace of mind. Of all the things I have learnt in my career, none is truer than that one should expect storms when all seems calmest. This experience was no exception to that rule—which, though I recognize it, I persistently ignore to my own undoing.

The bringer of fresh trouble was a young man of prepossessing aspect but undoubted determination. Daniel in the den could not have bearded lions with a more commanding gaze—though I doubt very much whether he had the same gift of voluble speech as this visitor of mine. He was, he explained, the local representative of the Australian broadcasting system, and all he wanted was that I should repeat my story from the local studio so that it could be put out over an all-Australia hook-up.

That was all, he said; it was as simple as that. All! I refused point-blank. Nothing could have pleased me less than the prospect of telling everyone in Australia, in my own words, where I was and what I was doing. But there was no escaping his pertinacity. He persuaded, cajoled, and bullied in turn. Now his smile was bewitching and seductive; now he stared at me with flashing eye and firm-set jaw. It was, I decided, a more harassing experience than anything that could come of the broadcast. After all, I told myself, with that flattering ingenuity which comes to the weak in their moments of foolish acquiescence, little

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more harm could be done. The fat was in the fire, and it was a matter of indifference whether the embers were stirred or not.

Briefly, I gave in. I wrote my script, had it vetted, and in due course sat down before the microphone. The purely private audience to whom I had first told the story off the record, as I had believed, was now enlarged to include all Australia. This was hardly the way to preserve an incognito or retire into obscurity. But I was beyond caring. It was all beyond my control now.

In due course, letters began to reach me—letters from people I had met before in Australia, asking me to lecture here and operate there and attend conferences somewhere else, and they were all written in the most generous and flattering terms. What I had feared was happening with a vengeance. Now I do not wish any of my many good friends in Australia to misunderstand me when I use that word 'feared'. I was not trying to hide from them; so far from annoying me, their remarkable interest in me brought me a warm glow of satisfaction. No, what I feared was having to refuse them, to appear churlish or ungrateful. I feared myself, too. For I was beginning to understand how weak I was, how easily I succumbed to temptation to do the things I like doing—and some of those offers were very attractive indeed.

Somehow I managed to be firm. The replies to my refusals showed a sympathy and understanding that were astonishing in all the circumstances, and that rekindled my admiration for the warm hearts and generosity of the Australian people. But it was a difficult task of which I would gladly have been relieved.

Now if it is hard indeed to refuse a friend at a distance, it is doubly difficult to say no to his face. No doubt it is the application of the underlying principle that leads salesmen and petitioners of every kind to use any and every device to gain a personal interview with their intended victim. If I could summon up sufficient courage

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to write letters declining offers and requests, I was to find I was not bold or ruthless enough to turn down a personal plea. A constitutional weakness was to betray me into throwing away my final hope of peace and quiet. It happened this way.

I was sitting restfully enjoying the warm sun when a visitor was announced. The name—Mathers—I knew, though I had never met the man, who was one of the principal surgeons at the district hospital. But I was pleased to meet him. He had a rising reputation in plastic surgery, and I was quite ready for an interlude of 'shop'.

But Mathers's purpose was something other than to while away a pleasant hour in the exchange of personal experiences. He had come, he said, to seek my help. There was a case that he wanted me to see and to operate upon.

I shook my head and smiled as disarmingly as I knew how.

'No,' I said. 'Please don't tell me about it. I don't want to be tempted. I've told you about my heart and why I'm here. Please spare me.'

But Mathers had the typical Australian trait of persistence. No doubt he had sensed the weakness in my words and noted the underlying suggestion that I was likely to yield to the right kind of temptation, provided it was put in the right way to me.

Seizing on the advantage I had unwittingly given him, he began to tell me about the case. He had a man in the hospital who needed a complete jaw reconstruction, and he proceeded to furnish me with details. As his account went on, my interest mounted. But when he paused, I again shook my head.

'Yes, I agree with you, Mathers,' I said firmly, 'a most interesting case. But why do you want me to operate? You're perfectly capable of carrying out a jaw reconstruction yourself—and you know it. If you think I can do it, then you certainly can.'

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He would not listen—or, rather, he refused to be turned from his purpose.

‘I’m not going to argue about that,’ he replied. ‘If you hadn’t turned up so opportunely—well, I should have to do it. But I’d be much happier if you did it.’

We argued. I knew I was on perfectly firm ground when I contended, again and again, that the operation lay well within his capabilities. It was absurd to think otherwise. But he was adamant. There is a curious belief, the world over, that the visiting specialist is *ipso facto* better than any native talent, and the fallacy is subscribed to by both patients and doctors alike. Sometimes, as I have seen—particularly in the United States—it leads to some queer and amusing situations.

I shall not try to reproduce the whole of the argument here. I will say only that in the end I agreed to see the case. But no more. I did not promise to operate and tried to give the impression that it was very unlikely that I would. He nodded and smiled. The first line of my defences had been breached. He went away, confident, I believe, that he had won his point.

The next day I visited the district hospital and saw the case. It was worse even than I had been led to believe. The patient was a man in his forties, and he had been suffering from an advanced cancer of the jaw. Only one treatment had been possible, if his life was to be saved: the greater part of the lower jaw had to be removed. So far the surgeons’ work had been successful; he had been taken from the immediate peril of death. But the operation had left him with practically no lower jaw at all. With that monstrous mask, he could never appear in public, and normal feeding would be impossible to him.

After I had studied the patient for a little while, I retired with Mathers and a couple of other surgeons to a small office.

Mathers glanced at me.

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'Well?' he asked.

'Certainly a bad case,' I answered. 'Not impossible, of course. But I still stick to my guns—you're quite capable of operating.'

'Maybe. But that's not the point. You've had more experience of these cases than I've had or I'm ever likely to have in this place. . . .'

So the argument was resumed, though with weakening resistance on my part. After all, if Mathers and his colleagues insisted, I could not refuse. Here was an operation of a kind that I had performed a good many times, though rarely, if ever, had previous cases been quite so serious. These men, rightly or wrongly, felt that I could perform it better than they. The patient's future depended on its being done, and it was impossible for me—or for any surgeon, similarly placed—to advance my own personal wishes and convenience as an argument for my not doing it. If I had been caught in a trap, I had contributed to the setting of that trap by my own imprudence and impetuosity. Inevitably, I agreed.

All the resources of the hospital, professional and material, were placed unreservedly at my disposal, and I soon found that they were of a far higher standard than one might legitimately have expected of a smallish district hospital in one of the more remote parts of Australia. In particular—though all who helped me showed complete competence—I remember the work of the dental surgeon who helped me to plan and carry out the operation. The man had teeth remaining in his upper jaw and in the fragments of the lower jaw, and it was vitally important, if a successful result was to be ensured, that these teeth should be brought properly into apposition. Regard had to be paid, too, to the possibility of fitting a denture later on. The devising of the necessary appliances to bring all this about was carried out in a masterly way, and I can say in all sincerity that nowhere in the world—not even in America, where these aspects of dentistry have

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been so studied and refined—could I have had better help. More than that I cannot say.

The modern operation for reconstruction of the jaw does not, as the older one did, involve taking a bone from another part of the body—usually a rib—and modelling it to shape, a difficult process that did not always give satisfactory results. Instead fragments of bone are taken from one of the more massive bones of the body, usually the iliac crest—the top of the hip bone—crushing them to small pieces, and then introducing them into the gap, where they are secured into position by special bandages. In time, these fragments fuse into a single solid bone of exactly the shape desired. This method is truly a plastic one, in the normal sense, for the repair is literally moulded into position.

With this procedure, many jaw reconstructions can be comparatively straightforward, but there was nothing simple about this particular one. Though we had planned it with the utmost care in advance, I found, in operation, that every move had to be closely watched, for the gap was enormous and there was little enough sound bone left on which the chips might find an anchorage. Indeed, I think that of all the jaw operations I have performed, this was one of the most exhausting and nerve-racking, and if I had not had available so fine an assistant as Mathers himself, as well as other highly competent helpers, I doubt whether it would have been completed. As it was it demanded no less than three hours' concentrated work, every minute of which seemed to present some new problem.

It was done at last. Never have I felt such relief at the termination of an operation as I did then. I was reminded inexorably that I was still far from being a fit man, and I left the hospital in a state of semi-exhaustion.

But my own problems were of small account at the moment. The great question, which dominated all else, was whether that long and trying work had been successful.

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There were all sorts of things that might go wrong, and the difficulties were multiplied by the fact that this had not been a repair after an accident or wound, but an operation after cancer—and the finest surgeon in the world cannot guarantee that, when he has operated for cancer, he has removed absolutely all the tiny centres of trouble. Just one of those, and the graft would probably not take at all.

The more I thought about it, the more it seemed to me that this operation could not possibly succeed. Very ungenerously, I mentally accused my friend Mathers of having inveigled me into performing it so that I, and not he, should take the blame for the failure that he, with his undoubted knowledge and skill, realized must be inevitable. For, I argued in this most despicable frame of mind, I should be going away eventually, while he would have to remain. . . .

My worries, my utterly false accusations, and my despair—to which I had been finally reduced—were alike unnecessary. For this case was one of those which demonstrate how often the only thing that happens in surgery is the unexpected. The patient was a man who had undergone one serious operation for cancer of the jaw—in itself something that must have tested him severely. This was followed by another protracted operation, this time to replace what the first intervention had taken away. Complications, lack of response—all the nightmares of the post-operative stages—were only to be expected. Yet this man, of whom so little could be expected, made a model recovery. He was comfortable from the first. The bone graft took well and gave no trouble at all. His general physical condition steadily improved. I was glad to leave him in the competent hands of the hospital staff much sooner than I had originally planned.

And what, I asked myself when it was all over and I had the time to grow introspective again—what had the effects been on myself? I had done precisely what I had vowed

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I would not do. In fact, ever since I had arrived in Australia, I appeared to indulge in all the things that the doctors had not ordered; and it did not lighten my sense of guilt to remember that one of those doctors had been myself, for this trip had been partly my own prescription. I expected to find my condition lowered and my tired heart beginning to emit danger signals.

But the unexpected happened again. So far from feeling exhausted either mentally or physically, I found I was feeling happier and fitter than I had for a long time. The occasional pains that had troubled me recently disappeared. My outlook on the world in general took on again something of its former optimism. I was tired—yes; but pleasantly tired, with the kind of tiredness that makes resting and lazing a delight, whereas before I had been restive at my inactivity. It was an astonishing and altogether exciting discovery.

New thoughts came to me. I began to question the wisdom of my decision in its original form. Perhaps I was wrong in trying completely to break with all my usual habits. It seemed to me that the strain of trying to avoid all contact with my profession and my friends was more tiring than doing a little work. After all, a man who has led a busy life doing things he likes doing and in which he is absorbed, can do himself great harm by suddenly stopping them. Therein lies the reason for so many of the tragedies that follow early retirement.

But I had to recognize that I needed rest. What I needed more than isolation was freedom. I must do as the mood dictated. Provided I avoided overwork, all would be well. For I had learnt already in two months (and one of them the shortest in the year) that the hardest work of all was endeavouring, in the phrase I have used so often, to get away from it all.

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Of all the human virtues, moderation is that most difficult to acquire—at least for one of my particular temperament. I could visualize a life into which work did not enter, a life spent in perpetual idleness, though I cannot say that such a life makes any great appeal to me. I had known, all my days, a life in which every minute was occupied, and in which it proved almost impossible to exclude professional matters even on my so-called holidays. But the type of ordered life so many seem to lead, a life in which work and leisure have each their rightful place and are balanced nicely—that I have never been able to attain.

- In making my revised decision not to deny myself a little interesting work if it came my way, I had overlooked this important fact. When invitations to operate or lecture were made to me, I considered them on their merits, and accepted those which appealed. I was soon to discover that, once again, I had made a major error of tactics. Perhaps explicably, as soon as it was seen that I was no longer refusing everything proposed to me, the tide of suggestions flowed again. Every time I accepted, the difficulty of refusing further requests increased. In fact, I could not do so without causing disappointment and perhaps offence to people whose friendship and esteem I valued. I had, in fact, landed myself once more in an awkward situation. If I had been wise, I would have left Australia the moment I had seen my patient with the

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reconstructed jaw was well on the road to recovery. The farther I go in life, however, the more I question whether I have ever been wise. True wisdom, after all, is a very rare quality. When it seems, in retrospect, that I have acted wisely in my life, I find, on reflection, that wisdom and foresight never really came into my decision at all. I acted, as I so often do, on the spur of the moment, and luck was on my side. More often, as I was now finding, luck does not side with the maker of spontaneous decisions. Yes, I can see all that, but I do not think I shall ever learn to put the lesson it teaches into practice.

The result of these offers was that I found myself working as hard as ever I had done—certainly my time and energies were as fully occupied as they had been in England at the time of my departure. Nor was my activity confined entirely to surgery, though naturally that was my principal concern. I was invited to write articles, to broadcast, to speak to literary societies. My engagements book began to look formidable. Something had to be done.

Despite it all, I was loth to leave Australia at once. The people were overwhelmingly kind to me, and I still felt that this continent, with its vast unpeopled spaces, could provide me with the peace and quiet that I so urgently needed. Perhaps it was this latter thought which led me to consider taking an appointment with the famous Flying Doctor Service. It is, to my mind, one of the most remarkable and finest medical services in the world. As most people know it originated between the wars to serve the outlying stations of the great Australian interior. Flying from place to place, as summoned by the radio, the doctor is able to bring medical and surgical help to people in need—people whose nearest neighbours probably lie a couple of days' journey away by ordinary transport. How many lives this magnificent service has saved since it was inaugurated, I do not know. What I do insist is that those who are so ready to condemn the aeroplane as a vehicle of destruction, the biggest curse that science has brought

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to man, would do well to be silent for a little and consider the immense humanitarian work that this one flying service alone has rendered to suffering mankind. The very fact that it had been copied, first in the United States, and later in Brazil, both of which countries have similar problems of isolated communities to deal with, is evidence of its great worth.

It seemed to offer to me personally everything I could desire. The actual medical and surgical work involved would not be overwhelming; a great amount of time would be spent in travelling; it gave little chance to become too caught up in the social round of the big cities. If I had been a perfectly fit man, I believe I should have taken up this work—and probably remained in it, so much does it fascinate me. But there was one overriding objection that caused me to abandon the idea, at any rate for the time being. The Service operates chiefly in Central Australia, a land of torrid suns and exhausting, dry heat. These conditions would do no good to a heart that was in need of every possible relief from strain, as it still reminded me from time to time. But the day may still come when I shall succumb to the lure of that wonderful Service.

Reluctantly giving up this scheme, I wondered what to do next. Clearly I must leave. But where should I go? As though Destiny had decided to take a hand again in my affairs, a letter arrived for me at this precise time to make up my mind for me. It came from America, where many friends were still anxious for me to settle, and it contained a cordial invitation to attend the California Medical Congress, which was meeting in a few weeks' time.

After reflection, I decided to accept. I had arrived at a point when I seemed incapable of making a decision of my own, and, left to myself, I might have taken root in that small town. And, as it was, efforts were being made to detain me—efforts that, if I stayed much longer, I am sure would have succeeded. Two City hospitals offered me permanent appointments. Each was tempting, providing

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all the scope I needed. But I felt unable to face the amount of work involved. In California, I might throw off this lassitude and be able to face the problems of the future more realistically.

It was with an oppression of guilt that I left the city that had been so kind and hospitable to me. I went away almost without warning, except to those who had to be informed. Goodbyes would, I believe, be embarrassing to everyone concerned. Some of my friends might even believe that their very generosity was driving me away. But it was with a sad heart that I set out for Sydney, whence I would emplane for San Francisco. If life for me in Australia had been more exciting than I had planned or wanted, it had, at any rate, been deeply interesting and my stay there had added much to my experience. That short period will long remain in my memory.

In Sydney I made inquiries about flying to San Francisco at the earliest possible moment, and here a great stroke of luck awaited me. The inaugural flight of the new Pan American Transocean Clipper Service was just about to be made, and there was one vacant seat available. On its being offered to me, I jumped at the opportunity. I should be in California more quickly than I had thought.

Only a little later, when I had had time to reflect, did I perceive that there were dangers in making this particular flight. As I have said, it was the inaugural one of a new service—and an American service at that. In Sydney the coming departure was being well publicised in the best American manner, and I knew that every overnight landing, every incident, was likely to be reported. For a man seeking to efface himself it hardly provided ideal conditions.

But I need not have worried. The mere fact that it was a notable flight turned out to be an advantage. Without exception, all the other passengers were people of the most exalted eminence, V.I.P.s whose names were widely known, particularly in Australia and the United States. In such a

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galaxy, I would certainly remain unnoticed, a mere super-cargo, a makeweight brought in to fill a place unaccountably left vacant. I could sit back in my luxurious seat, confident that the only attention I might attract would be no more than a passing speculation on how such a nonentity managed to gate-crash into such distinguished company.

That was probably the most luxurious flight I have yet made. Nothing had been forgotten, and I enjoyed every minute. The plane was scheduled to take three days from Sydney to San Francisco, and our overnight stops were to be at places whose very names are part of the romantic legend of the Pacific.

The first was Suva, the capital of Fiji Island, and here we were greeted in the traditional manner by beautiful native girls, who placed chaplets of exotic flowers about our necks and danced the famous dances for our benefit. Later, the travellers were entertained to a party at the expense of the airways company. Champagne and spirits flowed like water. The West met the East in a gigantic celebration.

But the air-traveller has little time for tarrying. We sped on to Calendar Island and then, after a brief stay, to Honolulu, where, once more, garlands were festooned about us and native ceremony greeted us. Yet it is not these things that I remember. Honolulu was a scene of almost unbelievable beauty in those days of brief tropical spring. Sea, sky, palms, and flowers fused together in a picture of paradise that all the evils of latter-day commercialization could not dim. It was, too, a time of festival. I had seen Honolulu before, but now it was a city transformed and exalted. For once, legend and reality fused into a unity that is unforgettable.

Here we stayed for twenty-four hours—twenty-four hours of complete rest and relaxation. But they were not without their serious moment. The distinguished passengers on the airliner had come to Honolulu to witness the

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unveiling of a fine memorial to the men and women and children who had been butchered there during the war by the Japs. It towered, lonely and impressive, above the mass grave in which their unrecognizable remains lay buried.

I confess that in that setting of peace and beauty this ceremony deeply impressed me. It seemed impossible that there, so short a time ago, some of the vilest atrocities in human history were being committed. And that thought stayed with me as we flew on to San Francisco. It was still there, haunting me, when we reached the Californian city and found the newspaper headlines celebrating the Japanese Peace Treaty. There, in cold print, I read that the Japs were now America's allies, partners in the world fight for freedom, civilization, and humanity. Was I wrong to feel a little nauseated, and to wonder what the relatives of those—some of them mere infants in arms—whose mangled remains lay in the grave from which I had so lately come, thought of this strange, macabre trick of History and Politics? Is it really credible that a nation of some eight million people can so quickly change its habits and its ways of thought, ingrained by centuries? But perhaps these are questions that a mere surgeon, who strives humbly to lift a little of the load of suffering from mankind, should not ask.

Such thoughts are, too, out of place in San Francisco, which is surely one of the most beautifully situated cities in the world, with its superb bay over which the graceful curve of the Golden Gates Suspension Bridge arches like a rainbow of steel. It is a city of eternal spring, and its people should be the happiest in the world. But how different is the reality from the vision! To the stay-at-home Briton, Chicago is the metropolis of American crime in all its ferocity; yet fact points to San Francisco as at least the equal of Chicago at its worst. Here, too, is one of the highest suicide rates in the world—and, curiously, San Francisco's suicides are bound up with that bridge

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which citizens rightly claim to be among the most beautiful in the world.

During one week while I was in the city, three people threw themselves from that fairylike bridge into the blue sea beneath, as though the beauty of it all were beyond endurance. And the greater tragedy is that most of these suicides are inexplicable on any rational basis. Let us, as I have raised this rather grisly topic, look at just one of the cases that occurred while I was there.

A fine Cadillac drove onto the bridge and stopped; when one of its occupants alighted, as so many do, to admire the glorious view across the bay. This spectator was by no means unknown in the city. A beautiful young woman, the wife of a highly successful business man, she was one of the rising young hostesses of San Francisco. And then, suddenly, it happened. She waved her hand to the friends she had left in the car, and, without more ado, leapt into the glittering sea below. Why did she do it?

The case was thoroughly investigated. None of the usual reasons for suicide—if suicide can be said ever to be inspired by reason—could be found. On the contrary, the young woman seemed to have everything she could desire. She had beauty. She had wealth. She was in love with her husband, as he was in love with her, and they had a young child. No shadow of marital dissension had come across their lives. That very morning she had been eagerly discussing a party she was giving in the evening. The whole tragedy seemed motiveless. Yet so do the majority of these cases. Whether it is the climate, or a sudden impulse such as some people experience on heights, or the fascination of the sea below, no-one can say; and it seems remarkable to me that Americans, with their passion for investigating everything psychologically and statistically, have not gone into the matter more thoroughly. Here, it seems to me, is one of the most curious examples of human behaviour that has remained unstudied.

I was not in San Francisco to study suicides, either

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psychologically or statistically, and, indeed, the subject is one that repels me. Nor, if I had been attracted to it, would I have had time to consider it. On the day after my arrival the Congress began, and I found my whole interest absorbed. In the surgery section, to which, naturally, I was drawn, the innovations and bold experiments of American surgeons almost took my breath away. I have heard detractors say that the unquestionable lead gained by American surgery in recent years is due entirely to the wealth of the United States, and that any country with the same amount of money to spend on research could achieve the same degree of success. But I do not think that is by any means the whole of the story—though, of course, vast sums spent on maintaining big research institutions do help a great deal.

No, I think the underlying reason is the freedom of the American mind from anything that savours of conservatism. It has, at times, an almost dangerous habit of admiring the new and most recent simply because it is new and most recent, and for anything, especially a technical operation—which is what surgery is—to be hallowed by time, as we say, is at once to lay it open to suspicion. So it is that the American is always looking ahead, always ready to probe into new ways and fresh possibilities, always seeking to go one better than the established method. The American surgeon is, perhaps, inclined to take more risks—but the risks he takes are always carefully calculated, and there comes a time when any innovator has to face risk. It is not to be held against him. And also, in addition to these things, there is, I am sure, a tendency in America to look on both surgery and medicine as much more of a science and far less of an art than elsewhere. A problem in surgery appears to the American to be simply a problem of technique, the answer to which can probably be found by research and experiment. It is not, as it is for most European surgeons, a personal problem of human relations as well as a technical one.

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But this is straying a little from the wonders of the Congress. They were so many that it would be impossible even to mention them all, and I can refer in detail only to that operation which impressed me most for its superb daring and originality.

The case concerned was one of stenosis of the mitral valve, which is the valve between the auricle and ventricle on the left side of the heart. Stenosis means that this valve has become partially occluded or closed, so that there is hardly any circulation between the two compartments of the heart; and since it is the left side of the heart which pumps the blood round the major-circulation system of the body, it can easily be understood that this condition has always been regarded as inevitably fatal. The closing of the valve, which is called mitral because of its shape, resembling a bishop's crown, is in effect a complete dam at the most important point of the blood stream.

Obviously the extremely young surgeon who was now proposing to operate did not take this pessimistic view. Barely thirty-five years of age, he was already spoken of as probably the most brilliant of all the surgeons that even the United States have produced in recent years; and as he proceeded to open the chest, his whole manner was one of quiet confidence, as though he were undertaking the most simple of routine operations.

When the chest had been opened and the heart had been exposed, he cut open the pericardium, the strong bag of membrane in which the heart is enclosed. Now came the dramatic moment, the manœuvre which I, and every other watching surgeon present, followed with bated breath and rapidly rising admiration. For he proceeded to make what is known as a purse-string suture on the thick, muscular wall of the heart itself. This type of suture is very like the draw string that used to be attached to purses; when the ends are pulled, the opening lying within the strings is puckered up tight.

The suture made, his assistant grasped the ends of the

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strings with forceps. The ensuing climax was sufficient to make one doubt the evidence of one's own eyes. For deftly and confidently, the surgeon pierced the heart, and as he thrust his finger deep into the wound, the assistant drew up the strings firmly so that barely a drop of blood escaped. That probing finger went straight to the valve and carefully freed it—it simply burst it open. And then the manœuvre of entry was repeated in reverse. As the surgeon withdrew his finger, the assistant tightened the strings still further. Finally the wounds were closed permanently and the patient was removed.

It was an astonishing operation not only in itself, but also for the wholly unconcerned way in which it was performed. Obviously such a procedure has to be deftly done; there is no margin for hesitation or error. But usually with such tricky affairs, the surgeon operates under a feeling of tension, which experienced observers can detect. There was none here. I have seen surgeons, by no means inexperienced, far more anxious in performing a straightforward appendix operation.

All of us who had seen this operation performed, eagerly followed the subsequent progress of the patient. It was admirable in every way; recovery was rapid and complete. Half an hour of almost miraculous surgery had not only saved a life in what seemed a hopeless case, but also restored that life to practically perfect health. And there are still those who think that surgery is no more than a desperate method of last resort, to be tried when all else fails, and almost certain to leave permanently damaged those who undergo its rigours!

This operation, which made an unforgettable impression on me, was not, I learnt, by any means the only spectacular one evolved by this young surgeon, whose abilities have been recognized by his appointment to the Chair of Experimental Surgery in a leading Eastern University. He had, so I was informed, inserted artificial valves into the arteries, using a special plastic material for the purpose,

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and the results so far had been highly encouraging. To understand what this means, it must be explained that where the aorta, the great trunk artery that carries the blood from the heart to be distributed through the body, joins the heart there is a valve which prevents the stream flowing back into the heart. There is a condition known as arterial regurgitation that arises when this valve does not function properly. Small quantities do flow back, and so an undue strain is put on the muscles of the heart, which tries to maintain the proper pressure. This state is particularly common in men who have to perform hard manual labour. Obviously, if this fault develops, it may lead to a fatal termination, for the heart becomes unable to maintain the blood pressure.

To remedy this condition, this surgeon has devised a special form of valve, similar in principle to what the engineer calls a clack, or non-return, valve, which passes fluid in one direction but not in the other, and by a specially devised and very ingenious technique he places this valve in position after putting the natural one out of action. This surely is the introduction of engineering into surgery, and perhaps at last it brings sense to the old gibe that the surgeon is only a glorified plumber.

Altogether that Congress was a stimulating experience that I would not have missed for anything, and I considered my decision to leave Australia well made indeed. But naturally it did not last long, and the problem of my future was still unsolved. The more I stayed in San Francisco, the more the climate appealed to me, and I toyed with the idea that perhaps I might settle there permanently. For the moment, however, I was not concerned with long-term plans. I wanted rest and change, and perhaps I might be able to secure some not very onerous post that would employ my mind and skill, yet not place too heavy a strain upon me. First, however, came the matter of registration as a qualified practitioner, which, as I had acquired official qualifications during my

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previous visit to the United States, I did not expect to present any difficulty.

Sacramento, the capital of the State, is not very far from San Francisco, and I decided to spend a day motoring out to the city to interview the Secretary of the Medical Registration Board and, at the same time, enjoy the sights. And it was at Sacramento that I learnt, what I had indeed long suspected, that it is not only the much maligned British Civil Service that is enmeshed in red tape, nor is it the British citizen alone who is oppressed by nonsensical and parochial laws and regulations.

I was received with typical American courtesy, and my proposal given a polite hearing. My belief that nothing more than a formality was involved was strengthened; and then to my utter astonishment the secretary shook his head. It was quite impossible, he said. The State of California, in its wisdom, recognized no medical qualifications but its own. As for foreign degrees, they simply did not exist.

I stared at him in silence for a full minute, hardly daring to believe my ears; and he shook his head again in confirmation.

'But,' I said, 'when I was in Washington last year, I passed the examination for American qualifications. I was led to believe it was accepted by every other State—or at any rate the majority of them. Besides,' I went on, my amazement increasing as the full truth sank in, 'I served as Associate Professor for a whole year in an Eastern University. Surely that counts for something?'

Once more that head shook. If I had an Eastern qualification, then that eased the situation a little, he explained. But whatever it was, the regulations were explicit and inescapable. Anyone wanting to practise in California had to work for a year as an intern in an accepted hospital. It did not matter if the newcomer had been a full professor in every one of the other forty-seven States, that year as an intern had to be served; the rule was never relaxed.

I believe that I stared at him open-mouthed. Certainly

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I have rarely been so astounded in all my life. For an intern, as everyone who has been to the movies knows, is to all intents and purposes the equivalent of a house-surgeon in England, a young man who, having qualified, is gaining his first practical, responsible experience. I remembered how shocked I had been when, in the Eastern States, I had discovered that not even the highest English qualifications were accepted unquestioningly in America—a fact that had led me, to the delight of the students I was then teaching, to sit alongside them to take the American examination. I had not thought that, having done that, I would find fresh barriers to American practice.

Everywhere, however, the law is the law, and one has to obey its rulings, no matter how nonsensical or even lunatic they may appear to be. I could not dispute the facts as given to me by the man who, above all, was responsible for their administration so far as medical registration went. All I could do was to thank him, apologize for the trouble I had given, and depart. I told him I would think it over. But I did not imagine that I would give the matter much thought. A year as an intern would not have appealed to me in any circumstances at the stage I had reached in my career, and then, when I was still in search of what I suppose an Army man would call a soft billet, the idea was simply fantastic.

So another passing scheme had been ruled out. All my efforts seemed to be dogged by bad luck, but I have always found that when things look blackest the ray of hope shines brightest and most unexpectedly. Now it came in the form of a letter, bearing the postmark of the city in which I had served as associate professor the year before. I glanced first at the signature, which turned out to be that of a close friend, with whom I had worked in close collaboration during my American visit. I read eagerly what he had to say. It was not much. He had heard I was in the States and he regarded that as providential, for he had a case about which he wished to consult me. He assured me

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it was one that would interest me deeply and urged me to come at once as it was right in my speciality and my advice was needed urgently.

Perhaps if that had come at some other time, I might have debated with myself the wisdom of accepting. But I was angry at everything Californian. I hated the sight of San Francisco. On the next airliner flying east, I was the most impatient passenger, irritated by the slightest delay.

I had telegraphed my friend of my departure, and he was waiting with his car for me at the airport.

'I'm glad you've managed to come,' he said. 'This case is right in your country.'

'But,' I said, anxious to make my protest at once, 'I am not going to operate. I'm taking sick leave. My heart's misbehaving itself. I'll give you my advice for what it's worth, but beyond that—nothing.'

He chuckled 'Well, we'll see,' he commented. 'But I guess this case will break down that resistance of yours.'

He took me to the hospital, where the patient had been made ready for my coming.

She was a girl of seventeen—and at my first glance at her, it was difficult to repress a shudder, experienced though I am. It was not that she was unattractive. On the contrary, she was, in her way, pretty. By American standards, which are governed by Hollywood and the cover girl, she was even beautiful, even though to European eyes, which are more pleased by individuality than by what is known as *typage*, she might have seemed more like a photograph than a human being. No, there was nothing wrong at all with her face.

It was when one's eyes travelled downwards that one's sensibilities were profoundly shocked. For her breasts had enlarged to an extent that was grotesque. Enlarged is, in fact, an inadequate word. They were gigantic, the largest that I have ever seen. With that disfigurement, whatever might be the cause, she could have none of the life that

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the American teen-age girl regards as essential to her development and success. No American young man, his values of womanhood inspired by the screen and the glossy magazines, would even think of making a date with her, and American young girls' fashions, which are designed to accentuate rather than conceal the bust, would be impossible to her. To any woman those mammoth breasts would have been a source of shame; to an American they were a tragic disaster. And already the psychological effects were all too plain. She was not simply reluctant to be examined; she hesitated to come into the room.

There had, I learnt, been some sort of glandular imbalance that had led to this gross overdevelopment, but that had been taken in hand and cured. What remained was the problem of restoring those breasts to something like normal proportions. So far the advice had been that they should be completely amputated, but her parents and friends, as well as herself, had held out strongly on that point. This would have led to a disfigurement—mutilation is not too strong a word—hardly more endurable than the enlargement.

It is almost impossible to convey in words how enormous those breasts were, but perhaps a simple figure will do something. Each weighed no less than seven pounds—a fantastic amount.

News of my presence in the country had inspired my friend to a new hope. When I had been with him I had demonstrated my special method of reducing enlarged breasts, and he paid me the compliment of believing that if anything could be done for this unhappy girl, I was the one to do it.

'I don't give much of a thought to Destiny,' he remarked with a twinkle in his eye. 'I've not a drop of Russian blood in me. But I just thought when I heard you were around that the answer had been handed in.'

I hardly knew what to do. My friend had been right when he had said the case would prove irresistible to me.

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It was a challenge to my skill. More than that there was the thought of the tragedy hanging over that young life, so far barely begun. I persuaded myself that one operation would not harm me. And perhaps after what I had seen in California, I had an unconscious wish to prove to myself that even non-Americans could practise surgery successfully. So I nodded and said I would undertake the case. But there must be no more.

² At the proper time, the girl was brought into the hospital as an in-patient and made ready for the operation. She said little, but I felt she did not expect much. She had reached the stage when she was beyond caring.

I had told myself, to overcome my qualms, that one operation would not harm me. But I had not reckoned on its being the most difficult operation of my whole career. I say that deliberately. There were moments when I despaired of ever coming to an end, one way or the other. It was not simply that so enormous a mass of tissue had to be cut away. I intended to remove about three-quarters of each of those gigantic breasts. It had to be excised in such a way that what remained would be properly provided with blood vessels to nourish the organs, and I always strive, when making this operation, to preserve as far as possible the natural function of the glands. Despite all my advance planning, I had, as it were, to feel my way step by step. There was the problem, too, of providing proper support for the nipple and ensuring that the reduced breasts would live—or be viable, to use the technical term. By the time the last stitch in the suture had been made, out of sight in the armpit, I was at the end of my tether. I felt on the point of collapse and that I, also, should be receiving the ministrations of doctors and nurses.

How far had I been successful? How could the patient stand up to the somewhat drastic treatment she had undergone? It might be days and days before I had the answer to those questions, for anything might happen. It would be terrible, I thought, if after all the hard work

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some post-operative complication set all my efforts at naught.

Gradually, my fears abated. No fever developed. The girl lay in her bed without pain, but still, so far as I could gather, indifferent to the results. At the end of ten days, when I was able to take away the final dressing and assess my work, I was almost overcome by my success. For in place of those monstrosities there were now two well-shaped, normal breasts. The face above them no longer seemed out of place. . . .

I recall my final meeting with the girl. It was not dramatic in any spectacular way, yet it affected me deeply. She was wearing a coat when she came into the room I had been given for the interview. Slowly she took it off, and when she looked up at me with a smile, I could see that there were tears in her eyes.

'Thank you, doctor,' she said in a low voice. 'Do you know this is the first time in my life I've ever been able to wear a sweater like the other girls? And I've wanted to ever since I was a kid in grade school.'

For her, what I had done was not a difficult surgical operation that had given her a chance of normal womanhood. It was the realization of the American teen-ager's dream, the opportunity of making dates, of conforming to all the rites and customs of American youth. And in its way it was a touching tribute.

Thus another month of my 'rest cure' ended. A quarter of the year was gone, and my New Year's resolution seemed to be going the way of all of its kind, for wherever I went, fate seemed to provide some fresh trap for me and force me to break it. I might indeed have performed only two operations, whereas if I had been at home I would probably have done dozens. But each had been a trying and exhausting experience. America had not brought me release. What was the next step? Where would my Destiny lead me next?

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**D**espite my failure so far to find the rest I needed so badly and the fact that wherever I went I found myself engaged in the most strenuous work, hope remained. I still believed that somewhere, somehow, I should find a way of escape. But where to go next, I did not know. To my original resolution I had now added another that come what may I would do as I had promised myself. So I made no plans. I would go wheresoever Fate led me. Perhaps I had planned too much in these past few months; so often the more one pursues a thing, the more it eludes one, and there was no reason why escape should be an exception. Besides, it could happen forever that I should be practically forced to accept cases. There were, I tried to assure myself—without any great success—plenty of other surgeons available to do whatever had to be done.

Beyond deciding, therefore, that I must leave America as soon as I could, I did nothing. The whole world was open to me, and no doubt some chance event, a sudden inclination, even a casual conversation, would send me off on the next stage of my travels. Whatever my ultimate destination, I would not be surprised, for the only lesson that had emerged so far in my wanderings had been 'hat the unexpected always happens.

Of course I was wrong. The shape of events not only astonished me but showed that unexpectedness is some-

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thing that can be intensified to an infinite degree. For, with only a quarter of my year 'away from it all' gone, I found myself back in England among the familiar scenes and caught up again in the daily round to avoid which I had flown to the Antipodes.

If I say that it was chance took me there, I know some people will smile. Chance is a word that must be very cautiously applied to human affairs. All too often, it is made the scapegoat for acts that we have wanted to perform but have not had the courage to define, even to ourselves. It might well have been that, unconsciously—or, rather, to please my psychologist friends, subconsciously—I had decided that escape was impossible, that if I could not escape work I would be better at home, and that there was more opportunity of finding rest in a familiar environment than elsewhere. Indeed, I am ready to confess that I had played with those ideas, and no doubt if my return had been permanent, I should have admitted that those thoughts had been the cause of it. Nevertheless, it was true chance—the entirely unpredictable—that caused me to leave America, and those thoughts to which I have referred influenced my decision only to the extent of leading me to make my journey eastwards via England.

But this is talking in riddles, and that is always impolite, never more so than when one is supposed to be making a confession. It came about in this way:

Among my letters from England one morning was one neatly typed on official-looking paper and in Italian. I glanced at it, not comprehending a word, and tossed it aside for later reference. It could only have to do with professional matters, and I was still determined to have nothing to do with them. But curiosity overcame me and I picked it up again. I read it. I re-read it. When I once more laid it on the table, I had forgotten everything else.

It was an invitation to the International Conference on Plastic Surgery, which was to be held in Turin the

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following month. So far, then, I had been right; the letter had to do with my work. But—and this was what set my thoughts whirling—I was being asked to preside over one of the sections into which the Conference was to be divided, and, of course, to read a paper on a subject of my own choosing. It was an honour and a compliment of which I had not so much as dreamed. I had, as it happened, known about the forthcoming Conference and had toyed with the idea of attending it—till I remembered that Conferences of this kind are apt to be expensive, and the British Treasury is not inclined to be over-generous in allowing foreign currency to those who propose to attend them. That down-to-earth fact had, indeed, been the deciding factor.

Now the whole situation was changed. The invitation was generous in the extreme, since it indicated that full hospitality would be provided for me and that I should be in every way the guest of the organizers during my stay. Temptation smiled at me.

I argued with myself. An invitation to a conference had brought me from Australia to the United States, and though it had been stimulating and enjoyable, it had badly upset my plans and landed me in trouble. The very word 'conference' (or its American equivalent 'convention') had acquired for me a somewhat ill-omened sound. Besides it was imperative for me to keep away from my professional colleagues, especially those in my own particular sphere. . . .

It was useless. Temptation was not merely smiling at me now, but beckoning alluringly; and I share Oscar Wilde's weakness in being able to resist everything except temptation. As soon as I had weakened a little, I began conjuring up all sorts of reasons why I ought to visit the conference. It would be signally discourteous to refuse when so high an honour was being paid me; even if I was determined to have a grace year, I had to return to my work sometime, and so it was a duty to keep abreast of

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new developments, such as would be discussed at this Conference . . . and so on.

Argument was of no use. I had to reply quickly, for already valuable time had been lost, since the letter had been forwarded from London and had been chasing me in my wanderings. Moreover, in a moment of honesty, I admitted to myself that all this argument was nothing more than an attempt to rationalize a decision I had already made, an effort to find sound-looking reasons for taking a course I really wanted to take. The best thing was to accept at once.

There were, in fact, special personal reasons that influenced this decision. Ever since I was a medical student in Italy, I have had an affection for the country which is second only to my love of England. I had felt the pull of the country and its lively people when, during the flight out to Australia, the plane had stopped at Rome—and I have already recalled how I was tempted then to stay there for a time. It would be early summer in Italy when I arrived—and the thought was irresistible.

Forthwith, I wrote a letter of thanks and acceptance. I had to name the subject of the address I would give as sectional president, but it did not take me long to make up my mind on this point. I decided, with the operation I had just performed still fresh in my memory, on the connection between enlarged breasts in women and sterility—a subject that has interested me deeply for some years and of which I have had, in my practice, some very suggestive examples. To my letter, therefore, I added a brief synopsis of what I proposed to say, and before second thoughts had time to occur, I sent it off immediately.

The moment the envelope was out of my hands I felt a sense of relief. My next step had been decided upon, and in a way that admitted of no drawing back. I managed to persuade myself, too, that in Italy I was not likely to be confronted suddenly with special cases. Certainly, at

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a conference of plastic surgeons, there would be skill and doctors enough to spare without calling on me, whatever might arise.

But now, on reflecting about it all, I discovered a fresh problem. Obviously, the presidential address I had undertaken to give would have to be very carefully prepared, and though I was confident that I could, if necessary, have sat down then and there and written a satisfactory text, I realized that I would need to incorporate references to work already done and to arrange for diagrams and so on. All my records were in London, where I had some photographs of illustrative cases from which excellent lantern slides could be made. To London, therefore, I would have to go, and without delay if everything was to be made ready in time. If that decision was inevitable, it did nevertheless raise a few qualms; to me, it rather suggested walking into the lions' den. I had an uneasy feeling that, if I had been unable to find idleness in either Australia or America, I was hardly likely to be more successful in London. These invitations which solved my problems seemed destined to conceal lurking dangers.

For once I was right. My dark forebodings were to be only too well fulfilled. It was absolutely of no use, I discovered, to insist that I had not returned to practice, that my holiday was interrupted not concluded, and that I was leaving again for abroad in a very short time. My protests—even my blunt refusals—were in vain. I was, it seemed, a fox who might never go to ground.

Would-be patients who were also strangers it was fairly easy to refuse. But it was not strangers who besieged me. Never before had I realized that I had so many personal friends—or that those personal friends had so many friends and relatives of their own in whose welfare they took an intimate and affectionate interest. I felt I was the centre of an intimate network whose ramifications stretched away on every hand to infinity. The extraordinary thing was that all these people needed operations or knew of

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others in similar case. Obviously (or so it appeared to all these men and women) I could not turn down their pleas. Of course, I needed a rest; of course I was right not to plunge into the flowing stream of regular practice; but no harm could come of my doing a friend a good turn. . . .

There were doctors whom I had known with more or less intimacy for some time, and they made requests that could not be ignored. They pointed out that they were not sending me patients in the ordinary way and respected my wishes in this direction, but as I was in England there was the case of a wife's cousin, or a son's fiancée's sister, or the brother of an old school friend. . . . There were, too, people at whose houses I had often been a guest and whom I had entertained, and these had friends who needed operations, friends whom they had counselled strongly to delay treatment till I should return (a subtle form of flattery that is one of the strongest weapons in the armoury of persuasion). . . . The sad thing was that they were right. I could not refuse these appeals without running the risk of making it impossible ever for me to return permanently to London. I had blundered not into a lions' den but into a gigantic spider's web that threatened to bind me hand and foot. Within little more than a week of my arrival, I was working as hard as ever; my appointments book contained a list as formidable as it had when the shadow of breakdown had fallen across me.

Some consolation for an unhappy state of affairs was to be found in that practically all these operations and consultations were routine. There was nothing particularly worrying or exhausting about any one of them. But whole days spent in the operating theatre (for I had to work continuously if I was to fulfil all my engagements) are perhaps a bigger strain than a couple of really difficult and tiring cases. I smiled grimly to myself when I recalled my confident, happy announcement on my return that my holiday was 'in abeyance'. 'Moribund' would have been the better word. In doctors' language, a fatal

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termination was almost certain to that holiday; and if this went on the same phrase would probably apply to me.

I have said that these were simple, routine cases—but that is not true of one of them. In a sense, it was an emergency case, and for its turning out as it did I have only myself to blame. Temptation lured me again. But I have no regrets. It provided me with an interesting and enriching experience that I am glad to have had.

It was, of course, a friend who set off the fuse. Otherwise I am certain I would never have heard of the case, which would have gone to hospital in the ordinary way and been dealt with competently by the surgeons on the spot. And as though fate had contrived the whole affair for my benefit, if I had not remained unusually late in my rooms to work on my paper for the Conference, the telephone call would never have reached me.

I recognized Mrs. Lickey's voice at once. She has been a family friend for a good many years, and she had once expressed undying gratitude to me because I had been able to solve a domestic crisis by introducing to her an Italian girl, the daughter of one of my hospital patients. Carlotta had, so Mrs. Lickey declared, turned out the best maid she had had for years.

And now it was of Carlotta she was speaking, in an agitated, urgent voice that was at times a little difficult to follow. Carlotta had had a serious accident—she had cut herself badly and severed . . . but I could not make out what it was that she had severed, for Mrs. Lickey had dissolved into frantic pleas for me to come at once. Everything possible must be done for the girl, and so far as I could gather, 'everything' meant me.

Reluctantly, I promised to motor over at once, though I pointed out it would take me nearly an hour to reach the house, and it would be far more satisfactory to send for an ambulance to take the girl to the nearest hospital. Mrs. Lickey would hear none of it. She had telephoned me before, but I had been out (I had been operating till late

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afternoon). I abandoned protests, but I did not feel at all amiable. The whole thing was wrong. I was muscling in, as the Americans used to say, on hospital territory. It was the sort of case that, but for the claims of long friendship, I would unhesitatingly have refused if it had come from another source. I reflected, as I waited in a traffic block, that if it was as serious as Mrs. Lickey had led me to believe, then the girl would be either dead or beyond hope when, at last, I arrived.

Mrs. Lickey, white and anxious, took me into the kitchen as soon as I reached the house. The room looked more like a shambles than a kitchen. Blood seemed to be everywhere, and the whole place was in utter confusion. Now, at last, I discovered the exact nature of the trouble. The girl had been trimming some lamb chops, which had been intended for dinner. The knife had slipped and she had completely amputated her thumb.

I remembered the combined feeling of irritation and dismay that this information produced in me. Carlotta should have been in hospital hours ago—literally hours, for it was three hours since this disaster occurred. She must have lost an impossible amount of blood. And on top of those somewhat depressing thoughts came two quite irrelevant ones. The first was how, in these days, a family managed to have lamb chops for dinner in the middle of the week. The second was wonder that any domestic knife could have proved so devastating—till I remembered that Carlotta's father owned a small restaurant and had probably taught her how to sharpen knives as soon as she could hold them. To this day I have found no solution for the first problem.

Things were not quite so bad as I had feared, though bad enough in all conscience. Mrs. Lickey had been a member of a First Aid Party during the war and had served in several incidents, particularly in the days of the flying-bombs. Her knowledge had not deserted her. She had managed to control the bleeding from the wound,



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which was now covered with a heavy field-dressing tightly bound into position and had become a shapeless red mass. She had, too, done what she could to treat the shock. But for this competent first aid, Carlotta would have become, after all this time, a hopeless case.

Again my irritation swelled up. It had been rank stupidity to send for me. The position was precisely what it had been in the first place: the girl would have to be taken to hospital, where she would have to receive a blood transfusion. If I called the local hospital, the case would be out of my hands, and all Mrs. Lickey would have achieved would be a delay that might easily prove fatal. On the other hand, if Mrs. Lickey insisted still on my taking the case, then I should have to take Carlotta in my car and subject her to a longish journey that she could well be spared in her present state.

While I was trying to decide what to do, I glanced at the table. It was a shocking sight. The whole top was covered with blood, though whether human or ovine I could not say, though I expect it was mixed. In the middle of this mess lay the chops and what I presume was the offending knife. Then I noticed something else—something so gruesome that it seemed scarcely credible. Alongside the plate lay the severed thumb, already shrivelled. If I had subscribed to the ancient belief that a fresh severed part of the human body immediately reappplied to its place of origin, will 'take' like a skin or bone graft, I should have had no chance here of putting the theory to the test. That sickening object was already dead and looked as though it could never have belonged to the girl who, despite her ashen pallor, was still attractive.

I put the facts to Mrs. Lickey. Hospital was the next and urgent step. There was a good one, as I knew, only half a mile away—a fact that emphasized the futility of my having been called. I proposed to take Carlotta there in my car. Mrs. Lickey was adamant. She insisted that I, and I alone, must treat the girl. Not wishing to increase

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the delay further, I sighed and agreed. In a few minutes, Carlotta had been made as comfortable as possible in the car, and I was driving Londonwards, trying to strike a balance between the need for speed and the desirability of keeping the patient as quiet as possible.

The normal treatment for a wound of this kind is simply to trim the site, leaving as much stump as possible to facilitate the later fitting of an artificial thumb, close the wound, and, of course, dress it carefully with proper precautions against infection; and after I had examined Carlotta's hand, I had nothing beyond this in my mind. And once more I thought how much more satisfactory it would have been if I had been left to carry on with my writing.

Next day when I saw the girl, she was able to talk, and showed every sign of making a good and quick recovery. Clearly, the affair had been a great shock to her, as was only to be expected, but the curious thing was that she did not worry much about the serious disability that a missing thumb always brings. It is, after all, man's opposable thumb that has enabled him to become a tool-using animal and to assert his superiority. What concerned her deeply was the disfigurement. How, she asked, could she go round with a thumbless hand? And she asked that question with all the fiery intensity of the Italian. I suggested an artificial thumb. She appeared insulted; it would be worse than no thumb at all.

It was her being Italian that made this attitude of regarding disfigurement as more tragic than disability so strange. For Italian women are workers all their lives, especially in the class from which Carlotta sprang. But her age may have had something to do with it. She was twenty-three, by which age most Italian girls, especially when they have Carlotta's attractiveness and good looks, are married and mothers. Perhaps she felt that this horrible business had robbed her of her last chance of matrimony. To English minds that may seem strange, for

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English girls of twenty-three are by no manner of means thought to be on the verge of lifelong spinsterhood. But I am sure I am right, and that she felt this to be a crowning tragedy to a life of disappointment.

It was as I was returning from this visit to her that my mind went back to the San Francisco Congress of Surgery. There, I remembered, I had witnessed a very beautifully performed operation on just such a mutilated hand as Carlotta's. This is not something that can be done on every person who has lost a thumb; in fact, practicable cases are comparatively few. But the more I considered it, the more I believed that Carlotta's was one of those comparatively few cases. So—why not? Mrs. Lickey had said she was to have everything, and that meant plastic surgery as well. . . .

I struggled with the idea, which I tried to dismiss as the height of absurdity. It was a long operation and a tedious one for both surgeon and patient. I was due to leave the country in a short time and could not begin cases that I might not be able to complete. There were, of course, dozens of perfectly sound arguments why I should not try to give Carlotta a new thumb. Each of those arguments, as I thought of it, seemed more convincing than the previous one, which had itself been quite conclusive. But nevertheless the next time I saw Carlotta, and she began complaining about the tragedy the loss meant to her, I mentioned—I hope casually—that it might be possible to build up a new thumb.

She started as though I had cracked a stockwhip at her.

'What?' she demanded. 'Then I must have it done. There is no doubt about it.'

Calling myself a fool for having raised the subject, I gave her details, trying to make the whole thing seem as unattractive as possible. It would involve several distinct operations, I told her, and they would spread out over a period of perhaps two months or even more. Nor was there any guarantee that the operation would be successful.

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In voluble Italian, she swept aside all objections. The one thing that mattered was the Thumb. If there was a chance of replacing her lost thumb, then it must be taken, no matter what the pain or discomfort. Did I want her to go about looking like a cripple? And if it was a matter of money, she had savings—she would hardly have been an Italian if she had not—and besides there was her father; he would help. And all this, again, was unusual, for in my experience there is no-one more difficult to persuade to undergo an operation of even the most minor sort, than an Italian. A family conference is the least of the normal objections that have to be overcome.

I promised to think it over, but I knew I would accept the case. Now this may appear lunatic of me. I have been complaining that I had been unable to escape work, yet here was I actually proposing a difficult operation when there was not the slightest obligation on me even to mention the possibility. If I did foolish things like that, then I have no cause to grumble at my being incapable of finding the rest I was seeking. It is a plausible, sound argument.

Nevertheless I had a reason, which appeared to me good. Sentimental critics may say I was influenced by the fact that a young, attractive girl was involved, and my heart was touched. If that cause operated, I was not consciously aware of it. Other, but still kind critics, will perhaps put it down to professional enthusiasm. Still others—but not so kind ones—will insist that I was prompted by vanity and even a desire to show off. I will leave them all to fight it out, if they think it worth while so to do.

For the simple reason was that I wanted to perform the operation. It was one that I had never had a chance of doing, and I do not like to think that there is any procedure in my own speciality that I am not familiar with. Perhaps, too, (and those unkind critics will nod their heads knowingly) I wanted to prove to myself that I was the equal of the American surgeons I had seen. More than

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that, here was an opportunity in a thousand. In peace time, there are fortunately not very many cases of this kind, and one was not likely to come my way again for a very long time, if it ever did. It was a heaven-sent chance that must not be missed, no matter what the effect on me; and I began to think more kindly of the insistent Mrs. Lickey who had forced this case on me.

As I have said, the operation is carried out in several stages. First the shell, as it were, of the new thumb is prepared. This is done on some convenient part of the body, more often than not, the abdomen, which was used in Carlotta's case. A flap of skin and the underlying tissues is raised and formed into a cylinder of roughly the length and diameter of the required thumb, the flap being stitched into what looks like a sausage. The area from which this flap is cut is then covered with skin from the adjoining areas slid forward and sutured into position. These operations were performed in the right-hand side of Carlotta's abdomen, the cylinder being about three inches long by one-and-a-half inches diameter, to allow for some contraction and for the trimming that would subsequently have to be done. Everything at this stage is carried out under local anaesthesia.

Now follows one of the weariest phases, for the patient has to remain quiet for some three weeks while the flap establishes its own circulation and acquires, it would hardly be too much to say, a life of its own. Carlotta's flap took well, and at the end of the period it looked like a thick stalk growing from her abdomen.

In the second stage, one end of the cylinder is split and the bone is inserted. This is taken, in a preliminary operation, from any convenient place, but very often the iliac crest is resorted to as in so many plastic operations requiring bone, and I found this the best place in this case. The bone is carefully shaped and trimmed and then slipped into the tube, where it is left to grow into position, again for a fairly lengthy period.

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Now, in the third stage, comes the most tricky part. The cylinder of flesh and bone, already looking very like a thumb, has to be transferred to its proper site on the hand. This is, of course, done without removing the cylinder from the abdomen. But before the parts can be joined, the surfaces of both cylinder and thumb-bases have to be freshened and prepared, and, on the site of the missing thumb, the various muscles and ligaments have to be very carefully identified so that they can be attached in the proper place to give the new thumb some power of movement. When this has been done, the extensor muscles—those which, with the hand in the normal position, straighten the thumb and move it away from the palm—are attached to the external side of the new thumb, while the flexor muscles, those which give bending and inward movement towards the palm, are joined to the internal side. After these somewhat complicated and delicate manoeuvres have been completed, the hand is strapped to the abdomen, to which the new thumb is still attached.

This is the critical stage, for, with the greatest care, there is no certainty that proper union will take place. But I was lucky with Carlotta. She was so anxious to have her hand restored to a more normal state that she was an ideal patient, and even in operations of this kind, the attitude of the patient helps a great deal. Indeed, it was more successful than I had dared to hope. With the hand still joined to the abdomen, she was able to produce some small movement in the new thumb—a circumstance that augured extremely well for the final result.

In the final stage, the hand is freed, and whatever adjustments are necessary are made. What results, in a successful operation, is a 'peg' thumb—a digit which is rigid all the way long and possessing no phalange joint; nor has it any nail. But, if the muscle attachments have united well, there is ample freedom in the thumb to enable objects to be firmly gripped.

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Naturally, a little time is needed for the individual to grow accustomed to the jointless thumb, but Carlotta made remarkable progress. Moreover, she was quite unself-conscious about it and so did not tend to draw unwelcome attention to it—as, unfortunately, many patients do. She found that she was able to carry on her normal work and returned to her job with Mrs. Lickey. When she went out, she affixed an imitation nail made of plastic to the thumb, using a special adhesive for the purpose. It is difficult to say whether the astonishingly successful result of this operation delighted her or me the more. For my part, I can say only that I have not once regretted the decision to carry it out—and I have not only forgiven Mrs. Lickey but also thanked her warmly for introducing me to so fascinating a case.

In telling the story of this girl and her thumb, I have run ahead of my story in time; for in point of fact I was not in attendance on Carlotta during the whole of the total period involved. When the crucial third stage had been completed—the attachment of the new thumb on the abdomen to the hand—I had to go on to Italy to attend the Conference. But this had been foreseen, and I had, in fact, planned the timetable so that my absence would coincide with one of the quiet periods between stages. The assistant whom I left in charge was well briefed to handle any conceivable emergency that might arise, and I was quite happy about his ability to deal with one—but I hoped and prayed that none would arise. He reported to me regularly, as I was anxious to keep full notes about the case, and every time I heard from him I glanced quickly at the letter to see if there was bad news. But it was consistently good. Nevertheless I never failed to sigh with relief when I saw that steady progress was recorded.

April ended in the blaze of the Conference. It was on a far more ambitious scale than I had expected, and the honour accorded me in making me a sectional president was all the greater because of that. Once more the

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unexpected happened. And again it was, if I may use so paradoxical a term, the unexpected unexpected. Experience of conferences in many different countries has led me to approach them warily. They can be, at times, extremely trying, both physically and mentally, and often on the social side, especially in the United States, they can be so strenuous that the poor European is apt to lose sight of the fact that he is supposed to be relaxing and enjoying himself. On this occasion I expected that, as an office holder, I might be submitted to a test of endurance that would tax me to the utmost.

It was not so in the slightest degree. I had flown to Australia hoping to find escape and rest far from home by ignoring my status as a doctor. I failed. The same pattern repeated itself in America. But here, near at hand and taking a prominent part in a professional gathering, I found my first experience of the holiday that I had been hunting so long and so far. That does not mean that the Conference did not have its testing moments or that, at times, the programme did not seem to be beyond human powers to fulfil. It was, after all, a meeting at which those with a common-interest wanted to learn as much and hear as much of others' experiences as was possible in the time. Yet it never became overwhelming in its demands—or shall I say better than the magnificent hospitality and organization of the Italians made it possible for ordinary men, and even tired men like myself, to complete an exacting agenda without becoming conscious of strain and with sufficient energy after the day's business to enjoy to the full the many relaxations and entertainments that were provided.

The organizers had, so far as I could discover, taken over entirely all the finest hotels in Turin to house the delegates and their wives—the latter having been specifically invited as guests of the Conference on the same terms as their husbands—in the most lavish manner possible. And each delegate was a guest in the fullest and widest sense



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of that word. He had *carte blanche* for anything and everything the hotels could provide, and if he failed, through modesty, to take advantage of it all, he felt that he was offending his generous hosts. But it was not in any sense one of those affairs at which professional and business men gather together, ostensibly to discuss common interests but in reality to engage in a round of banquets and amusements. The serious side remained the centre of the programme and had been arranged with the highest skill.

Of my own part in that business, I will say little. My address was received with most flattering compliments and inaugurated a discussion from which I am sure I benefited far more than my paper had helped the audience. Every day I was able to see and learn something fresh or listen to a new point of view, and I can only hope that what I was able to contribute to the discussions, official and unofficial, that ranged all round was of some small value to my colleagues.

I shall long remember the professional enthusiasm of that conference. It was well worth crossing half the world to attend. But for me it was still more memorable in another and more intimately personal way. There were moments when the years seemed to have rolled back and I was a student again. For here I met, renewed friendships, and exchanged memories to which time had added a soft glow that obscured the harsher details, with men who had been students at Florence in my time. It was difficult indeed to remember that the incidents, trivial and significant alike, we discussed all happened when the First World War was still a fresh and wounding memory and the resounding echoes of the Russian Revolution were still rolling round the world. All those years . . . and it seems but yesterday. How often did they and I use those words!

Nor was it only student days we had to recall. There were the years when we had lost sight of each other in the troubled mists that had obscured Europe between the

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wars. I met again men of my time who had already climbed to the eminence of professorial chairs, not only in Italy but in other lands. But there were others who had been content to tend the foundations on which all medicine and surgery rest: general practice. Often the metamorphosis of the student I had known into the man by my side was unexpected—at times inexplicable. There was Luiggi, whom everyone had thought to be destined for the highest honours in his profession; he was now a humble general practitioner in a tiny country town, travelling miles to outlying villages, and no man could have looked happier or more contented. Perhaps he was doing a nobler work in bringing health and healing to the primitive peasantry of Italy than if he had risen to the professorship for which he had been intended. And there was Georgio, who had never seemed to take his studies seriously, who had had a keener eye for a pretty face than for his textbooks. Who would have expected him to hold a Chair in one of the most famous universities of Italy? Some were grey, others bald, yet some seemed to have journeyed through the years and been unstained by their travelling. It was these last who roused in me the most vivid memories, for when I was with them I stepped back into the past, which became, for the moment, more real than the present. . . .

But these were experiences of an intimate kind that are ill at ease in the formal black-and-white dress of print. Let me, then, leave them there, in the magic soil of the minds in which they grew, and let me add simply this: that there are few periods in my life for which I am more grateful, or which I treasure more, than those days in Turin, when my youthful love for Italy was revived and found to be as ardent as ever it had been.

So we came to the last day and the final banquet. There were speeches of all kinds; medals and awards were conferred. It was a fitting climax to the whole, brilliant, sumptuous, superbly organized. Yet beneath all the wit and gaiety, the unending toasts, the promises to meet

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again, there was, for me at least, an undercurrent of sadness, as there must always be when friends meet together to say good-bye. Every passing moment brought its own perplexing question. Had all my life been in vain? Would I have done better to remain in Italy? What did the future hold for these, my friends, for those whom I had met for the first time—and for me? Futile, pointless questions; but I do not think I was the only one who asked them, or others similar to them, that night.

On the next day, my wife and I set out to return to England. The Conference itself was a memory, to join the others. The time had come to return to the harsh realities of life. For me, that meant a resumption of my quest for re-creation. I realized I was tired, very tired, and that the Conference had been more strenuous than it had seemed while in progress. True, I was refreshed mentally and, perhaps, spiritually. I had found a holiday—but it was not the sort that could last; and as we journeyed northwards I knew I was not going home. I was still a bird of passage, and I had to find yet another answer for the problem: Where do I go now?

## May



Ever since I was a boy I have been consumed with the desire to travel and to see the world, particularly its more remote and stranger places. It seemed absurd, therefore, that now, with eight months still to go of my year at large and all the world to choose from, I felt something like mental paralysis whenever I tried to think where I might go. In the four months past I had acquired a degree of cautious doubt that, my friends tell me, is not usually one of my strongest characteristics. Really, my indecision was not so very surprising. So far I had been unlucky—or unwise—in my choices. I had discovered not rest but where no rest was for me. My inclinations might lead me to think of Australia again or even the United States; my reason told me that I should find peace in neither.

At last it came down to a process of elimination. Where, I asked myself, was I least likely to be caught up, as I had been in both Australia and America, by the claims of work, pressed upon me against my wish or will? My thoughts turned to South America. More particularly, they centred on Brazil. When I had visited South America before, some years ago, on a lecture tour, I had spent almost the whole of my time in Argentina and Chile. To Brazil, I paid little more than the most fleeting of tourists' calls. Yet it was a country that fascinated me, with its Portuguese-bred civilization, so different in many ways from that of the Spanish-bred customs of the other South

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American republics, its strange, vast unexplored places round which so many fantastic legends have been woven, though the truth is often more fantastic than the legend, and its odd extremes in almost every one of the activities of man and Nature.

Other advantages, too, were offered by Brazil, from my point of view. If my new-found caution prevented my thinking that the country would provide no chance of my working, I could at least say with confidence that the chances were very remote. I knew that Brazil would recognize no medical qualifications but her own, and that, like most young nations, she insisted on the letter of the law so that none could say she was not self-sufficient. There was, too, the language difficulty, a fact that was not likely to encourage my becoming involved in dangerous friendships. If I have acquired a little Spanish, I certainly do not claim to have mastered the rudiments of Portuguese, particularly the Brazilian kind.

Brazil, then, it was to be. But I did not rush at it, hoping for the best, as I had when I had elected to go to Australia. Still cautious, I ruled out flying. In the relatively constricted space of an airliner, one becomes automatically on friendly terms with everyone, and I had already decided that the strain of trying to maintain an incognito was beyond my powers. A sea trip across the South Atlantic would provide a wonderful relaxation at this time of the year (though I confess to feeling a little sad at leaving England in May when the country has an individual charm no other can match). Finally, I would make no secret of my identity. A doctor I was, and as a doctor I would travel, openly and without mystery, not seeking, as I had done before, to put an iron curtain round myself but rather to rely upon the natural decency of other people to respect my human right to privacy if I wished to exercise it.

The first days of May, then, found me aboard the famous Royal Mail Lines ship *Andes*. It proved a happy choice in

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every way, and the ten days I spent in her were days of comfort and relaxation. From the moment I went aboard, the ship's surgeon, a most likable and competent young man, took me under his wing and made it his special care to see that I lacked nothing. He had, it turned out, read several of my books, both popular and severely surgical, and professed himself to admire them strongly.

When he first told me this, I felt an instant alarm. Of all the many forms of hero-worship, none is more fantastic or possessive than that shown by a reader towards a favourite author. The stage-struck and the film-fan alike are content to worship from afar and to accept with humble gratitude their minute share of a gesture thrown to the world at large; each is reduced, on a personal meeting, to a state of ecstasy that expresses itself in verbal paralysis and a desire to grovel on the floor in a luxuriance of self-abasement.

But the literary worshipper has no such humility. He and his adopted author are, he assumes, in some mutual state of rapport and intellectual communication. If there is awe in his attitude, it is not that which is accorded to a creature of another and more exalted world, but the awe that a man gives to a cherished comrade of superior wisdom. More than that, this kind of fan is never tongue-tied. He is, on the contrary, loquacious to the point of garrulity. He has, too, a sublime faith in his own powers of judgment and criticism, a faith that is, all too often, completely misplaced. Most frightening of all, he affects to remember every trivial incident and most minor character in each of the books his victim has written, and expects the author to do the same. As the author is, in these cases, usually a writer of best sellers and a man of prodigious output, this expectation is unfulfilled and unfulfillable.

But there was none of these terrifying characteristics about my new friend, Dr. Wharton. He said, with obvious sincerity, that he liked what I had written and left it at that. Flattery, gush, and an assumption of godlike critical

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powers, would, I think, have been utterly repugnant to him. Though I was with him much, only once did he discuss with me in detail something I had written—and that was a paper I had contributed to a medical journal on the very subject on which I had addressed the Conference I had so lately left.

Uneventful day slipped into uneventful day, and I began to find so real a peace that I felt sad at the thought of its ending so soon. The weather throughout the voyage was ideal, and the world of alarms and excursions, of sudden calls and unreasonable patients, was far away. But not, as it happened, so far away as I was inclined to think. And it was Dr. Wharton who reminded me that, wherever he may be, a doctor's life is always liable to interruptions. It was, however, quite a minor diversion, and the whole affair was melancholy rather than disturbing.

I had told Dr. Wharton that if at any time he felt I could assist him professionally in any way, he was not to hesitate to call on me; it was the least I could do in return for all his kindness, and, frankly, I did not expect that anything would arise to cause him to hold me to my promise. He was far too capable for that. So when, late one evening, he entered my cabin, looking grave and worried, and asked me if I would help him by seeing a serious case, I immediately jumped to the conclusion that a very great emergency indeed had arisen.

'Why, certainly I'll do what I can,' I said, slipping on my jacket—I had already started to undress. 'Who is it? And what's the matter?'

'Heart—not much hope so far as I can see,' he replied tersely, taking my second question first. 'It's the American chap, Loos.'

'Oh!'

Cornelius Loos—I had looked up the full name in the passenger list and been amused at its aggressive Dutchness—was undoubtedly the wealthiest voyager on the

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*Andes*, in which, with his charming wife, he occupied the finest suite of cabins and staterooms. He did not mix much with his fellow passengers, though when he did appear in public, he was always affable and made no secret of who he was or where he was going. Everyone on the ship knew by now that he was vice-president of a big oil company on his way to Rio de Janeiro, where some sort of international convention of oilmen was to be held. Nor did he disguise the obvious fact—obvious at any rate to a doctor—that he was a sick man. He looked considerably older than the fifty-six years he claimed. And now, so it appeared, fate had caught up with him, and, far from all those medical and surgical resources his wealth could have brought him in America, he was being challenged by his disease.

I followed Wharton into the cabin. Loos was on the bed, his torso propped up against an upturned chair covered with pillows and his knees raised slightly on other pillows. A single glance was sufficient to reveal that he was already a dying man. There was nothing Wharton or I or any doctor could have done for him, and when, later, we had his history, that judgment was confirmed. For years he had been suffering from rheumatic heart disease, and his doctors had tried again and again to induce him to retire. But he had refused. He would rather die in harness, he retorted, no matter how soon, than linger on in bed. He had taken Mrs. Loos with him on a leisurely tour of Europe ending in this sea-trip, which would, he had hoped, restore him sufficiently for the convention. His wife had carried out the elaborate routine detailed for his care unfailingly, but she knew, as he had known, that it must be only a matter of time. Collapse might be slow and gradual, or it might come suddenly as it had now through the formation of an embolus—a clot blocking the blood-vessels of the heart itself.

There was nothing we could do. Perhaps that brilliant heart surgeon I had seen at San Francisco might have



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had some answer to the problem, but even he would have been more or less helpless on board ship. And as we watched, that choking, terrifying breathing ceased, and the head dropped forward. It was a sombre moment—for, to a doctor, there is nothing more saddening than to be forced to stand by watching a patient die and knowing that he is beyond all human aid. .

Yes, it was indeed one of those experiences that, however long I remain in practice, I will still pray that I be spared. And it had for me then a very special significance that depressed me. Just so, I reflected, death might come to me unless I can obtain that rest. . . . That may have been egotistical to a degree beyond excuse, yet it was a thought I could not suppress.

Mrs. Loos was in tears. That she had been prepared, that she knew this moment must come sooner or later, did not lessen her grief. Such knowledge rarely does. Wharton and I offered such condolences as we could, but she paid no attention, and in any event they hardly mattered. What is there that one can say on such occasions to blunt their edge, to lessen the pain of the wound? That is a problem to which I as a doctor, all my life, have never found the solution, and I do not think I ever shall.

Loos had left instructions that if he died at sea, he was to be buried there. A business-man all his life, and one, I imagine, of considerable talents, he had made a habit of providing for all emergencies, and if sudden death was a likely one, proper arrangements had to be made in advance. Thus it came about that, two days before we were due in Rio, I witnessed a burial at sea for the first time.

I had always imagined that it would be impressive, and I was not mistaken. In its very simplicity, the absence of all those trappings that have, through long familiarity, tended to make the normal funeral an emotionless routine, it seems far more solemn a reminder of our mortality than anything ashore. The shroud, covered with the Union Jack and the Stars and Stripes, lay on a bier, and was

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brought on deck by six members of the crew. The captain, bare-headed and serious, read the stark phrases of the English burial service, and then the bier was borne off to the stern, where, in the presence of the ship's officers and a few privileged people, it was slipped easily into the waters. Not perhaps a very cheerful interlude, yet one not without its beauty. But the incident cast an air of restraint over the ship, which lasted for the whole of those forty-eight hours or so that brought us into Rio.

There, such is the resiliency of the human spirit, poor Cornelius Loos was practically forgotten. May in Rio is the end of autumn, one of the best seasons there of all the year.

Some cities seem to have been born legends, the very mention of their names evoking thoughts of glamour and romance, while the people who come from them are looked upon as an exotic race set apart from the rest of mankind. I myself have often been amused by the expressions of awe, incredulity, and wonder when I happen to mention that I spent a large part of my boyhood in the magic city of Samarkand. But Samarkand and other cities like it are old and have a right to be legendary. The marvel is that some relatively new towns of the transatlantic world have acquired already the status of legends.

Of these select few, Rio de Janeiro stands head and shoulders above the rest in its powers of suggesting paradise to those who have never been there. Sixty years ago Rudyard Kipling wrote his famous verses setting forth all he would miss in life unless he went 'Rolling down to Rio . . . These wonders to behold'. Today every Hollywood producer of gigantic musicals knows that he is safe if he sets his latest epic in Rio, for the name itself conjures up everything in the way of tropical glamour, love-haunted nights, mysterious beauty, and all it takes to make the queues line up at the box-office, television notwithstanding.

And what is the truth? That is a question which, after my last visit to Rio, I often find myself asking—and it is

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one, curiously, to which I have never yet found a completely satisfying answer.

It is easy enough to adopt a sternly realistic attitude and strip away all the gilt and tinsel in which popular imagination has wrapped the city. There are quite enough sordid sights in Rio to fill one first with indignation and disgust and then, when one finds protest useless, to make one flee in the determination never to return again. But so there are in every great capital city. This realistic approach, however, is as misleading as its opposite of uncritical worship. The plain truth is that when one has admitted all the unpleasant facts, discounted all the publicity poured out by tourist agencies and so on, and, by living there for a time, grown accustomed to an atmosphere and a way of life that are very different from anything to be found elsewhere, Rio still has something to mark it out from all other cities, ancient and modern.

To me at least it is this uniqueness which is Rio's predominant charm, something that makes it one of the most exciting cities in the world—and by 'exciting' I do not mean that it is necessarily a place of odd adventures and mysterious proceedings. Rio, it must be remembered, is the capital of a country that is bigger in area than the United States by as much as a quarter of a million square miles, and such a city, like all capitals, is sure to have its own personality, especially when it has been in existence for some four hundred years. But Rio has something over and above this. It has determinedly gone its own way, content to be itself and nothing else, not aping any other country, conscious of its past but more concerned with its present (and a little careless about its future). It is not like the other great city of Brazil, Sao Paulo, of which I shall say something later on, a thriving, growing commercial centre that, all in all, might have been transplanted from the United States. No-one would dream of tagging on to it a title like 'The Paris of the New World', which has been applied to Buenos Aires. Rio is, in fact, and I

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repeat it, itself. Above that it is Brazilian—and that is the most exciting part about it.

In Rio you can see a new race of man in the making. Here is going on a commingling of human stocks on a scale almost unparalleled anywhere else. Brazil knows nothing of colour bars or racial barriers, and the vastly assorted peoples who have flowed into the country are amalgamating into something unique. Something, in fact, that is not Latin American but Brazilian.

This is a point that strikes one very forcibly if one comes to Rio after visiting some of the other South American republics first. One expects, since Brazil is Portuguese in origin and the rest of South America is Spanish, to find differences, but not the complete distinction with which one is actually confronted. I know Buenos Aires very well and the difference in atmosphere and outlook is almost overwhelming. I do not want to suggest that the good citizens of Buenos Aires are not utterly and patriotically Argentine. They are very much so. Indeed in many ways they are far more nationalist and conscious of themselves as an emergent nation than Brazil is. But they have not renounced entirely their links with the old world. The Argentine family is always proud when it can point to a Spanish ancestry. There is still among all grades of society a sort of sentimental attachment for Spain. But Brazil—and especially Rio—is content to be Brazilian. Ancestry does not matter.

Innumerable strains have been thrown into this racial melting pot that is Rio. No doubt the Portuguese strain is predominant, as Portuguese is the language of the country. But in the course of four centuries people of all races have come to Brazil and played their part in building up the republic. Europeans of almost every kind have added their quota, but especially Italians, Germans and Irish. Asia too, particularly Japan, has been more than generous in its contribution. In the days of the slave trade negroes were brought across to Brazil in enormous

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numbers, estimated reliably to be not less than four millions, and these, too, have added to the mixture. And the native tribes, the 'Indians', whom the original settlers found in Brazil are strongly represented.

Already then in Brazil—and again particularly in Rio—it is easy to notice signs of a new racial type with a light coffee-coloured skin and features that are a handsome combination of European, Asian, Negroid and 'Indian'. It is this which makes Rio so exciting. Here history—racial, not national—is in the making, and one is able to have a glimpse of how one's own people developed in the distant past. For what is going on so actively and so inevitably in Brazil today is similar to what happened in England when Angles, Saxons, Jutes, Danes, Norwegians, Celts and later Normans, amalgamated to form an English people that has remained different from all the rest of Europe, being neither distinctively Teutonic nor distinctively Latin.

This independence, this determination to live an individual life, is to be seen everywhere in Rio and nowhere more than in the ways of its inhabitants. They know what they want, but if they cannot get it they will not wait. And this is not due in any sense to an innate desire to hustle—the last thing a Carioca, as inhabitants of Rio call themselves, would think of doing. It is simply that whether he wants a cup of cafezinho, the sweet black coffee he drinks frequently at all hours, or an interview with a high official in one of the imposing Government buildings that line the magnificent Avenues, he will not bother further with it if his wishes cannot be met at once. This is one of the things to which it is particularly difficult to grow accustomed in Rio after the more orderly behaviour of people in other lands.

But perhaps I have said too much of the people and their ways, which to me are always the most fascinating aspects of any part of the world I may visit. What of the city itself and the exotic beauty legend ascribes to it?

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Here again, Rio is like no other city on earth. It stands on one of the most magnificent bays in the world with a sea of an intense blue that is at first almost difficult to believe. Dominating it is the famous Sugar Loaf Mountain, which has, of course, become a tourists' paradise served by a telpher railway. But the Sugar Loaf is only one—and the largest—of a range of mountains whose curious conical shapes suggest they have been made by man rather than fashioned by the timeless forces of Nature.

These mountains are the masters of the city. They have dictated the way it has grown and will continue to dictate how it shall grow in years to come. The city streets, even the great Avenida Atlantica, seem to have been squeezed in between these mountain slopes. Many of the streets wind apologetically as though anxious not to disturb the somnolent majesty of these peaks. And here, nestling on the lower slopes, are the rich blocks of flats and villas of the plutocracy of Rio, together with the less ambitious homes of the officials and the tradesmen, the professional classes and the superior artisans.

I have said that Rio, like every capital, has its darker spots and it would be a very unbalanced and misleading picture of the city that failed to present them, not only from the point of view of truth but also because they provide yet another illustration of the uniqueness of Rio and its utter disregard of the laws of growth that govern other cities.

In England we call them slums; in Rio they are called '*favelas*'. But except in that the two words apply to the lowest and most primitive type of dwelling, they have little else in common. A *favela* hut is a mere accretion of mud reinforced with wire to hold it together: it would not be tolerated in this country. The paradox lies in that these hovels occupy what, to ordinary judgment, are the finest sites in or near the city. While the houses of the rich cluster in the valleys between the mountains, sweltering in the heat and denied the cooling breeze, these *favelas* are

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set high up on the slopes; and the poorer they are, the more destitute their occupants, the higher they are placed. Up here the air is pure, cool and bracing, with all the tonic qualities of mountain air; the view looks out across landscapes not surpassed anywhere. One could well imagine that sites such as these would have been eagerly snapped up by the millionaires of Rio—of whom there are many—as ideal places in which to escape the heat and cramped oppressiveness of the city. But these remain in the closed-in valleys.

There is, of course, a hard practical reason for this. Rich men do not, as a rule, let the poverty-stricken enjoy such advantages without due cause. And the reason is water. However its people and customs may be individual and independent, Brazil shares with the rest of South America (apart from some of the sodden jungle districts) an almost perpetual drought, and water is a scarce and valuable commodity. To raise water, by pump and pipe, to those delectable mountain slopes would involve an expense that not even Rio's rich men could support. So these open spaces are left to the *favela* dwellers, humble, struggling people who are prepared to carry by their own labour cans of water to those remote heights. They are, indeed, glad to pay this price for any sort of dwelling at all, for on what they earn there would be no lodging in the city itself for them.

For in Brazil—and again particularly in Rio—the contrast between rich and poor is perhaps even more violent than it is in most South American republics. It is stated by authorities that, on the whole, Rio's three million people are amongst the least healthy, worst educated, most undernourished, and the lowest-paid, in any city of the world that claims affinity with western civilization. The same authorities add that the public services, notably transport, fall far below the standards of other capitals. This is the part of the picture that terrifies, for no-one seems to care; even those who suffer most take it all for granted and

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even, if their cheerfulness is any guide, appear to enjoy life.

On the other hand, Rio is a city of millionaires most of whom have made their pile in coffee, with excursions in land speculation, from which huge profits have been and are still to be made. There is a 'high life' in Rio that is, I think, more expensive than is to be found anywhere else, either in Europe or in America. It finds its greatest and most complete expression in the fabulous pleasure resort of Copacabana—and it is here perhaps that the conventional Rio legend comes nearest to realization. Here, beneath their striped umbrellas, the rich men and women of Brazil lounge in the sun or bathe in that incredibly blue sea. Here they dine and dance, and the women display jewels of fabulous worth. Here they can witness cabaret and indulge in all those diversions which go to the making of the smart life the world over. The only difference, apart from the natural sumptuousness of the setting of Copacabana, is that the cost of each evening's entertainment is a prince's ransom.

But whatever it may be in Rio, one finds that it is different and often, by what we would consider normal standards, outrageous to the point of madness. There is, for example, the traffic. In South American cities everywhere it is the fashion to drive dangerously fast and to clear the road ahead, as far as possible, by continuous use of the horn. In Rio the traffic, composed almost entirely of large and costly American cars, is faster and more furious than anywhere else. Rio has, in fact, the highest accident rate, or something very near it, in all South America and that means, probably, in the world. And in this sad state of affairs the law not only connives but encourages. As a matter of fact, I was soon to find out personally how bizarre and incredible the traffic laws were. This unique experience came a few days later. At the moment I was still fascinated by the fabulous Rio de Janeiro.

I learned about another kind of law, in another realm,



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that has quite the opposite effect from that regulating the traffic. This law or regulation if you like, says that those engaged in building, whether as bricklayers or plasterers or plumbers or whatever it may be, have the right to make their homes in the structure on which they are working until it is completed. Naturally building is the most leisurely of all operations in a city where nothing but the traffic moves fast—and for the very simple reason that the builder's men, having set up their simple homes in the new structures, are reluctant to finish them and make themselves homeless until the next job comes along.

This, perhaps more than anything else, drives home the fact that Rio is not a bustling home of commerce and business. Such mundane affairs are beneath its notice. It is content to be itself, to derive its wealth from elsewhere, and fashion out a way of life that pleases the mood of the moment. Yet Brazil is a rich country and, as the statistics affirm, one that is rapidly increasing its importance in the world's trade.

Living in Rio one feels this quite incredible. These people could never drive a bargain or organize an industry. And one will not find the answer in Rio, the capital, however hard one seeks. But make the three-hundred-mile flight to Sao Paulo, along an airway that, with fifty scheduled flights each way per day, is one of the busiest in the world, and the secret of Brazil's prosperity is revealed.

Sao Paulo, just four hundred years old and celebrating the fact next year, is almost everything that Rio is not. Rio is content to live; Sao Paulo is actively engaged in the business of making a living. Rio does everything casually, waiting for nothing, caring for little; Sao Paulo believes in order, and outside England I doubt whether any people are more addicted to queueing for what they want than the Paulistas. In Rio, shut in by the mountains, the air is enervating and it is difficult to summon energy even for ordinary everyday duties of life; in Sao Paulo, set high up three thousand feet in the Ypiranga Mountains,

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it is brisk and invigorating and muscles and mind are stimulated to action.

Rio, as I have said, is Rio; one can think of it in no other terms. But when an American writer calls Sao Paulo the 'Chicago of South America' one immediately accepts the description as apt and in no sense derogatory. Nor does the similarity end with the fact that Sao Paulo is immersed, from top to bottom, with the business of making wealth. Its architecture is American. Skyscrapers spring upwards into the sky—and the city is growing so fast that there is no room for leisurely building laws like those of Rio.

Sao Paulo is, in fact, the most rapidly expanding city at the present time in the Americas, North and South. Already it is the third largest in South America, and if its current rate of growth continues it will outstrip all others before the present century ends. And it is as prolific of wealth as it is of people and buildings. Paulistas, who like the inhabitants of all young and booming cities are inclined to brag a little, claim that in their city a new building is completed every hour and a millionaire is born every day. Whether the latter claim can be substantiated or not, it is fact that in the eight years since the end of the war Sao Paulo has added one thousand new millionaires to its already impressive list.

And the basis of all this activity and riches? Principally coffee. Sao Paulo stands on the edge of those fertile highlands on which Brazilians grow the finest coffee in the world in quantities so vast that they sometimes become embarrassing, as the popular song of a few years ago brought to the notice of the world at large. Forty miles away is the great coffee port of Santos, with which Sao Paulo is connected by one of the fastest railways anywhere—another contrast to Rio, with its antique transport system. There are, however, other things besides coffee, for in the rich land, comparable to the American West of the nineteenth century, to which Sao Paulo is the natural

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gateway and of which it is the financial and commercial centre and controller, other valuable crops are being developed: sugar, cereals of all kinds, tobacco, fruit, wine—all these are produce in which the busy Paulistas trade to add wealth to their city and prosperity to Brazil, a prosperity in which, in some mysterious way, Rio shares.

No, there could be no greater contrast than between casual, individual Rio and bustling, go-getting Sao Paulo. Not that the latter, for all its deep concern with the problems of today and tomorrow, is unmindful of its history. There is much in the city to recall the days of Portuguese colonization; charming, patioed buildings and cobbled streets are still to be found among the skyscrapers. But they are survivals and it is impossible to doubt that in a little while most of them will have made way to buildings designed to serve Sao Paulo's modern preoccupations. In Rio, on the other hand, the old buildings and the new are parts of a single whole. The new does not supplant or oust the old but grows out of it, like new branches on an ancient tree. And that, perhaps, sums it up as nothing else could. Rio grows, matures, enriches itself with the years, as a personality should and must. Sao Paulo plans and drives, seeing a goal—the goal of wealth—ever before it and regarding the attainment of that goal as the greatest of all goals.

In a country as vast and as undeveloped as Brazil there is room for both. Indeed the two outlooks are complementary, since but for the vigorous progressiveness of Sao Paulo and all it stands for, Rio would have neither the time nor the means to lead its own legendary life.

## June

From what I have said about Rio, it is not difficult to imagine that I was more than intrigued with that wonderful city.

Yes, I liked Rio, which in May and June, the 'winter' of the southern hemisphere, provides a magnificent climate, that, in my view, is not to be surpassed anywhere in the world. There I had found, after five months' frantic search, the rest I had needed, and already I felt considerably restored in health, while my usually sanguine outlook on life was re-establishing itself. If I could discover no real reason for leaving, I could certainly name a good many for remaining. In fact, at that time, it did not appear unlikely that I might spend the whole of the remainder of my sabbatical year in that pleasant Brazilian city.

As always, however, the urge for work was returning to me. After all, the time would soon return when I must give very serious consideration to my future practice. Apart from that, I am at all times eager for fresh experience and to study medical conditions wherever I may be. It is a failing (or virtue, if you care to call it that) that has often led me into situations I would rather have avoided. What more natural, then, than that I should decide, as I did, to spend some of my time in Rio in finding out about the conditions of practice there, and the opportunities for the newcomer?.

On the face of it, there seemed to be every encouraging

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prospect. Brazil is a young and expanding country, already wealthy and with untold possibilities of development. Its area is roughly a quarter of a million square miles more than that of the United States, though its population is no more than that of England and Wales and Scotland. True, a large part of the land consists of the great Amazonian forests and swamps, but man has shown himself capable of dealing with conditions hardly less formidable elsewhere, and there are abundant natural resources that, so far, have been left untouched. It was easy—after consulting the statistics—to imagine Brazil as one of the heirs of the future. But statistics are not everything. However accurate they may be, they omit the most important factor of all: the strange and incalculable psychology of man, particularly in his relations with foreigners.

Let me, then, continue the statistical tale with that important reservation in mind, for it turned out to be a decisive influence. A doctor is interested not so much in commercial and industrial possibilities as in the populations that those possibilities attract. And when I came to investigate the cold figures of medical service in Brazil, I discovered, as I thought, a land that must be crying out for doctors.

To those who know Brazil only through the graceful city of Rio, with its great beauties and its civilized charm and atmosphere of wealth and luxury, it may come as a shock to learn that the country is one of the worst off for doctors in the world. In the lists that I consulted, only two South American countries, Guatemala and Honduras, neither of them large or rich as Brazil is, are shown as worse provided with doctors. For every hundred thousand of population, Honduras has seven and Guatemala ten doctors. As compared with these, Brazil has seventeen per hundred thousand. In England the proportion of doctors per hundred thousand of population is one hundred and twenty-four, in the United States, one hundred and ninety-five. It is an incredible comparison, the more so

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when it is remembered that, apart from the scattered Indian peoples, practically the whole of Brazil's population is concentrated in a few towns along the coastal belt.

To enter such a country to practise would, I imagined, be easy. For some reason or other, I decided, the thousands of doctors who had emigrated from Europe during the past twenty years had overlooked this rich and promising land, or perhaps had been dazzled by the visions of wealth in the United States and failed to consider any alternative. But I was to discover at once that I was, to use the expressive colloquialism, right off the beam. If there are practically no doctors with foreign degrees in Brazil, it is because Brazil does not want them. If that sounds an extraordinary and unbelievable statement, I can only retort that it is true, a bald statement of fact. Nor is it due to any unique healthiness of the country, which, on the contrary, contains some of the most disease-ridden areas in the world in the valley of the Amazon. And since I spent the greater part of June in discovering the remarkable facts that led me to this conclusion, and furthermore those facts may be useful to young doctors who have turned a speculative eye on Brazil, this chapter is devoted to showing how I found out the truth.

First of all let me make it clear that between no two countries in the world—except perhaps between those that form the British Commonwealth—is there an absolutely free exchange of doctors. Each country has its own regulations and rules, as I have personally discovered, often to my own inconvenience, and was to discover again in the ensuing months, and shall relate in succeeding chapters. There is good reason for this, for there is in the various countries no common standard of professional competence. But no country either in my personal experience or in the books I have consulted, has erected an iron curtain so armour-plated against foreign practitioners as Brazil.

In his own country, whether it be one in Europe or the United States, a man may have attained the highest

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distinctions he can win there. But the moment he sets foot in Brazil he need no longer consider himself a doctor so far as actual practice is concerned. Indeed, he may even forget that he is supposed to be an educated man, for if his aim is to work in Brazil he will have to go to school again—and not simply to the medical school.

The first thing that will be demanded of him is that he shall pass an examination in Portuguese—perhaps not an altogether unreasonable stipulation—and in Brazilian history, the importance of which to a man desiring to practise medicine is perhaps open to doubt. If he succeeds in doing this—and it is unlikely that any previous education he has had will help him much—he is eligible to take the ordinary matriculation examination for acceptance as a student; and it is for this that he will, as I have said, have to go to school again, for most men have forgotten, as useless knowledge, many of the things they learnt at school. For myself I have the gravest doubts of my ever being able to reach even a pass standard in matriculation mathematics, and I am confident that there are few of my fellow-practitioners anywhere who could, after, say, fifteen years of work in a field that demands neither algebra nor geometry.

These hurdles, stiff though they are, are only the beginning of a testing course, for now, after matriculation, the would-be doctor has to begin all his training anew. There are no fewer than twenty-seven medical and allied examinations that he must take before he will be recognized as qualified to join the ranks of the Brazilian medical profession. Faced with this syllabus, the candidate from abroad might be justified in thinking that the standard of proficiency among Brazilian doctors must be higher than it is in any other part of the world, not excepting the United States. But there, again, he would be wrong. For this torture of the twenty-seven grades has been devised especially for the foreign invader, who has to undergo a trial by ordeal to prove his fitness for Brazilian qualification. The native student, after his six years' course, has

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little difficulty in dealing with the examinations that are set for him—examinations that are comparable to those in any of the major countries. For the foreign candidate, there are special tests, including all manner of exotic specialities—such as neurosurgery—of which, in other countries, even distinguished medical and surgical professors would not feel ashamed to confess ignorance.

Now it is a well-known fact that syllabuses of examinations and regulations often appear more formidable in cold print than they turn out to be in actual practice. One frequently finds that the strict letter of the law is not observed, and that the full rigour of examinations is not insisted upon. Examining boards often prove to be, in fact, extremely human and far more apt to rely on their own keen personal judgment than on mechanical compliance with rules. So when I found all this out I was not unduly deterred. No doubt there was a way round. All this complicated and—as I saw it unnecessary—procedure would not be enforced when a man could show that he had considerable experience in such countries as Great Britain or the United States.

Never was I further from the truth. These rules are observed in Brazil with a scrupulousness that verges on the fantastic—I can put it no other way; and I learnt that this was so from the personal experience of an old friend of mine.

I have already said that I had friends in Brazil, but that so far I had not looked them up, since I feared I might be led into situations of an embarrassing kind. But when I decided to assess possibilities in the country, I recalled the name of a doctor friend and colleague who had gone to Brazil some years before and determined to seek his advice. Let us call him Dr. Abrams, a non-committal name that does, however, indicate that he is Jewish.

I had known him first, years ago, in Germany, when it was clear that he had before him a brilliant career, for not only had he a fine mind but he also possessed all the



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will to succeed that is characteristic of his race. He had, in fact, already started to make a considerable reputation for himself in Munich when the Nazis came to power—an event that for him, as for thousands of other Jews, meant an end to all his ambitions in Germany. More fortunate than many, he managed to leave the country, and after a little while he established himself in Rome.

For all too many refugees, escape meant something more than the mere exchange of one country for another; it meant starting life all over again. Men of high professional status found themselves in the most menial positions—but were glad to possess their freedom and to find a livelihood. Dr. Abrams did not know those hardships, at any rate for more than a brief period. Within a short time he had built up a very fine practice in Rome, where his consulting-rooms were amongst the best-equipped in the city—so much so that they were something of a show-place for visiting doctors. It appeared then that he had chosen wisely, and that his flight from Munich had been only a slight interruption of his career.

Mussolini, however, came more and more under the domination of Hitler, and in the late 'thirties he, too, adopted an anti-Jewish policy, which, if not so virulent as the Nazis', again threatened Dr. Abrams's livelihood. Once more he decided to seek fresh openings, and so, a year or two before the war, he came to England. It was in London I met him again, as a house-surgeon in my own hospital, where he was working to establish a footing in the British profession.

The war brought fresh complications. After the fall of France in 1940, there came the only serious outbreak of xenophobia I have ever seen in England. Fear of the fifth column that had rotted France from within was, perhaps explicable, rampant in a country that stood under the daily threat of invasion and with most of its defences shattered at Dunkirk. Vague suspicion rested on everyone whose names or antecedents had the slightest suggestion

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of being foreign about them, while those who had had definite associations with Germany were subjected sometimes to open hostility. Foreign Jews, too, had a special fear of their own. They knew something of Hitler's power and many believed it could be only a matter of time before England, too, was under the Nazi heel.

Under this dual pressure, many took any chance that offered of emigrating from Europe altogether, though others, perhaps realizing that an attitude so utterly alien to the British tradition could not be more than a passing phase, remained—not a few, to perform admirable war service. Dr. Abrams, however, was one of those who decided that he had had enough. In 1940 he sailed for Brazil.

I had heard from him occasionally, though, as we had never been particularly intimate, we maintained no regular correspondence. He had not said much about his affairs, but, knowing his abilities and his determination to succeed, I had assumed that he was establishing himself if nothing more. Apart from my immediate interest, I felt it would be entertaining to see him again and talk of old times. His wife, too, I knew, for she had been a patient of mine, and I had operated on her for an abdominal tumour.

His address was in my book, and up to then it had remained just an address. But now I knew something of Rio, and, as I wrote the envelope of the short note I had prepared, I realized that it was in one of the middle-class parts of the city. But like all South American cities, Rio is a place of extremes. If one could not afford the fantastic rents of the better quarters, one had little choice, and perhaps Dr. Abrams had not found eleven years sufficient to rise to the greatest heights.

In due course I received a reply, with a cordial invitation to call when I would. That very evening I was being greeted by him with the sort of welcome that suggested a man to whom a friendly call was an unusual event. No

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host and hostess could have done more for a guest, yet on every side I saw the little stigmas of people hard pressed, if not poverty-stricken. The furniture was shabby, and the armchair in which I was sitting creaked a little beneath my weight. The tablecloth had been neatly, but repeatedly, darned. The cup from which I drank my coffee was of fine china and very different from the coarse, plain, chipped ones that Dr. and Mrs. Abrams had themselves. The contrast between this and the imposing consulting-rooms and fine apartment they had had in Rome was startling.

Little by little the story emerged. It came in sidelights rather than directly, for Dr. Abrams did not openly bewail his ill fortune or try to rouse my sympathy. On the contrary, he tried to make light of it. Yet beneath his affability, he was obviously a weary and disappointed man. His wife went out daily to give English lessons, a not very profitable profession, and hardly what the wife of a prosperous doctor would do. For five years after his arrival in Brazil, Dr. Abrams had not been allowed to sit for any examination at all; he had lived as best he could, taking whatever chance brought his way: coaching backward students, assisting in pharmacies as a dispenser. And even when, having spent long hours with his school-books again, he had been permitted to sit for the initial examination he had been failed.

‘But that was to be expected,’ he said calmly, with the air of a man who, having learnt all the infamies of the world, is entirely disillusioned. ‘A foreigner seldom passes at the first attempt. At the second he has an outside chance. At the third he can allow himself hope.’

He had encountered the same attitude over and over again as, with grim determination, he had presented himself for each of the twenty-seven examinations in turn.

‘I remember,’ he said, in the same matter-of-fact voice, ‘one occasion particularly, because it was so blatant—and yet I felt it was the first piece of honesty I had met

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over here. It was a *viva* examination. The presiding professor looked at his sheet, asked my name and then glanced at me. "You're a stranger, aren't you?" he asked. "This is your first time here, isn't it?" "Yes, sir," I said. And he just shrugged his shoulders. "You might just as well go home, you know," he said. "There's no hope of a pass this time."

Yet he was still determined. The very strength of the opposition had strengthened his will, I think. After eleven years of struggle, he had still three more examinations to take. On his table lay three large volumes on neurosurgery—the very subject the inclusion of which in the qualifying examinations had astonished me.

'At any rate,' he said with a crooked smile, tapping the books, "I shall know more when I've finished than ever I should if I'd stayed in Europe or gone to the States.'

I felt my bewilderment rising. It was beyond belief that a man of his attainments should be treated in this way. But he waved my protests aside. He had grown fatalistic and was even prepared in a mild way to defend a system I could not see as other than iniquitous.

'There's a certain amount of right on their side,' he said. 'They have got to be careful. Fifteen years ago or so, they accepted European degrees without question, and what happened? When the refugee rush started they were swamped with men who were hardly doctors at all. True, they'd all got diplomas of a kind—but you know what some of those are worth. So when they found their door was open too wide, they just slammed it tight. Self-protection.'

'But it's going too far,' I insisted. 'Surely they could exercise some sort of discrimination? A little common sense can sort the wheat from the chaff.'

He smiled wearily and shrugged.

A little later I left them, with their invitation to come again soon ringing in my ears. I felt depressed and disappointed: depressed that the medical fraternity could

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go to such incredible extremes and victimize those whose only wish was to earn an honest living and give such talents as they possessed to the use of the country, disappointed that a country so obviously in need of doctors should handicap itself in this way. For there was no question of racial purity involved. The Brazilians have no racial theories or colour bars, and there can be very, very few Portuguese families in the country whose history does not show mixed marriages with the native Indian population. The more I thought of it, the less there seemed to me to be any reasonable explanation at all. But if the rational basis, if any, of these things was beyond imagination, the practical conclusion to be drawn was quite plain: Brazil had nothing to offer in the way of medical practice. By the time I had waited for recognition, I might be considering retirement!

Next morning, after breakfast, I was struggling laboriously through the newspaper, when a name in a small paragraph caught my eye and caused a pleasant thrill of excitement. The exact meaning of the lines escaped me, but the sense was clear. Senhor Oswaldo de Teixeira, the distinguished artist, had returned to Rio de Janeiro after a brief absence.

A thousand memories came flooding into my mind. Of my meeting with Oswaldo, when he was studying art and I medicine, in Florence, I have told elsewhere,<sup>1</sup> as also of how I posed as his model for the painting that won for him a cherished prize and a scholarship from his Government, and ever since that time, now so many years ago, he and I had remained in a contact as intimate as correspondence could make it. It seemed almost miraculous that the then struggling student had become the leading portrait painter not only of Brazil but of all the South American republics, whose presidents, including President Vargas of Brazil, had been honoured to sit for him. Fame, wealth, and position had come to Oswaldo, but I knew that none of those things

<sup>1</sup> See *The Healing Knife*.

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had spoilt him, and that his heart remained as generous and friendly as it had always been.

For Oswaldo de Teixeira had risen to the top from the most abject poverty. He had travelled the hard road, as I had, and that had established between us a special bond of union. At the age of twelve he was supporting his widowed mother in the fabulously rich pleasure resort of Copacabana, and then he had been a pavement artist. It was a hard life for a boy, but he gritted his teeth and endured—and in the end his pluck was rewarded. His work was noticed by a professor of the art school, who saw in it something more than talent, and from that moment Oswaldo's future was assured. He went to the art school; eventually he found his way to Italy, the Mecca of all art students, and it was there I had met him and our friendship had begun. Today he was more influential than ever had been the kind professor who had first recognized his merit and opened the gates of paradise for him; yet I know that he never forgot that benefactor—and I am no less certain that, in his turn, he has been, and is still, the guardian angel of many a struggling student. But Oswaldo is not the man to let his good works shine before him; he keeps such things to himself.

I had intended to call upon him before I left Rio, for I knew that he would never forgive me if he learnt that I had been in Rio and had not let him know. It had been a great disappointment to me when I had discovered that he was away, and no-one seemed to know when he would return. And now he was back! In my delight and excitement I leapt to my feet and was on the point of rushing out, there and then, to see him, when second thoughts struck me. Oswaldo, I told myself sternly, was a great and important man, with all manner of things to do. He was not to be disturbed by importunate and unheralded callers, however old a friendship they might lay claim to, and no doubt he had many appointments to fulfil. Yet it was impossible to retain that prudent attitude for long.

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Within an hour I was on the telephone, listening to his delighted cry of surprise and his careful directions as to when and where I should meet him.

That reunion held no disappointment at all. It was one of those all too rare exceptions to the rule that meeting old friends, especially those of student days, contains always a hint of sadness that the past cannot be recaptured. For there was nothing of the famous painter about Oswaldo—at least to me. He was the same helpful, patient, kind man as I remembered.

As the evening wore on, the conversation turned, as it had to—for he wanted to know all about me and my future plans—to professional topics, and I mentioned my utter amazement and disappointment at the attitude of the Brazilian Medical Board. He sighed. And then, quite seriously, he repeated to me the official reasons, which I had already had from the Ministry of Education (which controls medical matters in Brazil) and from Dr. Abrams. Too many foreigners of dubious qualifications had been pouring into the country . . . it was better, in the Brazilian view, to have fewer doctors than to have bad ones. . . .

‘And that’, I put in, knowing I could speak freely to him, ‘is just what Brazil has got. I’d even say a bad doctor was better than none.’

I could not forget that there was only one doctor to about every six thousand Brazilians, and that—a fact I learnt later—an unduly large proportion of those pathetically few doctors were concentrated in Rio.

He smiled patiently.

‘Perhaps we have gone too far,’ he conceded. ‘To you, it seems ridiculous, even unwise perhaps. But then you have not seen things as they were. But this I will tell you, George, and I mean it. We do want plastic surgeons—especially men of your calibre. I don’t think that, if you go about it the right way, you would find it so difficult as you imagine to obtain permission to practise. You can’t

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expect to walk into the country and set yourself up at once, even with all your experience, in competition with our own men, you know.'

His rebuke was very gentle.

'No,' I replied. 'Nor do I expect to. But I don't expect, either, to be treated as though I'm just leaving school and haven't seen an operation in my life.'

For a minute or two he did not reply, but sat thoughtfully, with his eyes closed.

'Listen, George,' he said. 'This is how I see it. The law wouldn't permit you to stay in the country and earn your living even if your qualifications were recognized. You've got a transit visa and that only entitles you to spend money here, not earn it.' He smiled broadly. 'And you're not allowed to apply for a residence permit while you're still here. Obviously that couldn't be done; it would open the door to all sorts of abuses. You'll have to leave the country and apply for permission from outside. I think I can help you there. Where did you intend to go from here?'

I shook my head. 'I haven't made up my mind,' I answered. 'All I can say is that wherever I eventually land up, I shall probably travel by way of the States.'

'Good. That makes it easier. The Brazilian Ambassador in Washington is a personal friend of mine. I'll write a letter to him now while I've still got it all fresh in my mind.'

Without giving me a chance to protest or argue, he crossed to his desk, drew out a sheet of notepaper, and began to write. He told me what he had said in that letter, which, as it turned out, was never delivered. Because I know that he will not mind, however, I reproduce here a few translated verbatim extracts from it. It was so very typical of Oswaldo's never-tiring desire to help a friend by every means in his power.

Dear Friend, he wrote: This is to introduce to you Professor [*sic*] Sava, who wishes to settle in Brazil. I



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would like to recommend him most cordially. . . . Brazil has much to gain from his skill as a plastic surgeon, and our university will be ready to take him as an associate. . . .

There was much besides, for the Brazilian retains all the ancient Portuguese love of the flowery phrase.

'You see,' he explained, when I had put the envelope in my pocket, 'I am sure the university would take you as an associate, and there would be no difficulty about that, though you wouldn't be allowed to engage in outside practice. But once you have your foot in, it won't be easy to shut the door again. Before you leave, go and see President Vargas, and put your case to him.'

'The President!' I exclaimed in astonishment. 'But how on earth can I obtain an audience with him?'

He chuckled softly, and told me the history of the late President Vargas, which is as odd as anything in the very odd history of Brazil. It was twenty years before that Vargas had suddenly irrupted into the Brazilian political world in the traditional South American way, at the head of a successful revolution. Within a short time he had established himself firmly as a dictator, swept aside the constitution, and set up a confident one-man rule that seemed impregnable to all those varied attacks which are levelled at South American governments. It appeared, in fact, as though Vargas's regime was to be as stable and enduring as that of President Carmona in Portugal, the mother-country of Brazil. But fifteen years later, the Army revolted, and Vargas narrowly escaped death by managing to get away, at the last moment, to the United States. Democracy returned to Brazil. A new president was elected, the constitution restored. Freedom breathed again.

Some five years later, however, Vargas made a spectacular return. To the Brazilians, it seemed, democracy had not the same appeal as it has to the peoples of the West, for they welcomed him as a liberator. Once more the

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reins of power were handed to him, and all the normal constitutional restraints were voluntarily abandoned. More than that, Vargas attained a popularity second only to that of Peron in Argentina. He was regarded as a 'people's man', and he encouraged the belief by making himself available every day, without exception, during the afternoons, to everyone who wished to speak to him.

'All you have to do,' said Oswaldo, as though he were making the most commonplace statement in the world, 'is to go round tomorrow afternoon and have a talk with him.'

Though Oswaldo made this statement seriously, it seemed to me beyond belief, even in this astonishing country. But I resolved to put it to the test the very next afternoon, and to my complete amazement I found myself, after a brief wait in an ante-room, talking to the President, who listened attentively to what I had to say. So far, so good, I thought; but what next? And I waited for vague temporizing statements that would leave the matter precisely where it stood. Again a surprise awaited me, for this unique man issued instructions that I was to be taken to the Minister of Education, who would, I was assured, give me a sympathetic hearing. A hearty handshake, and the audience was over.

The Minister of Education was, however, too busy to see me, but although I suspected it, this again was not a temporizing move. On the contrary I was taken at once to his deputy's offices, where I was told that as soon as the Deputy Minister's present caller had gone, I would be given an interview.

In the small, comfortable waiting-room there were already a man and a small girl, of, I guessed, about seven years of age. He was a quiet respectable man, who looked as though he might have come up from one of the larger provincial towns. He sat on the edge of his chair rather nervously, as though he were a trifle overawed at finding himself in these formidable surroundings, and he avoided

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my gaze as though frightened I might try to make conversation, to which he felt unequal.

My eyes rested on the child. She was about the same height and build as my own younger daughter, and that at once would have been sufficient to rouse my sympathetic interest. Apart from that, however, she was very striking. Her hair was golden—itsself remarkable in Brazil, when the fairness is due to Nature not to art. Her eyes too were large, and luminous, her nose almost perfectly formed. A remarkable child—and I began to wonder whether a word of admiration and congratulation would put her father more at his ease, for it was clear that he adored her. And then, as my glance lowered, I had to summon all my self-control to suppress a shudder.

Her mouth was one of the most horrible sights I have ever seen. The upper lip barely existed. It was cleft in two places—and neither was a small cleft. Through each the teeth could be seen clearly. I have seen, and treated, many harelips, including double ones, in my time, but none, I think, had been as bad as this. To me, the tragedy was all the deeper in that those faults could be so easily corrected—and in any civilized country (that was the exact term I used to myself) the operation would have been performed long before she had reached her present age. From her nose to the crown of her head, she had the makings of an outstandingly beautiful woman, from the nose downwards, her face was monstrous. It was a pity—to say the least—and this was the country that thought itself so rich in doctors that it could snub all who came to its shores from the outer world—or a country, as Oswaldo had suggested, that thought no doctors better than bad ones.

The child fidgeted a little under my gaze and coloured, but somehow I managed to raise a smile and a little nod, and I think I restored her calm. But her instinctive shrinking from my glance told its own tale. Psychological trouble was already springing from the physical one, and I hesitated

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to think what she might become as she grew older—and all so unnecessary.

Perhaps it was as well that at that moment a secretary came to summon me to my interview. If I had remained longer there with my rising feeling that such things could be allowed, I do not know to what excesses I might not have been tempted.

It was in a somewhat uncooperative mood that I faced the Deputy Minister, who, however, was politeness itself. He listened sympathetically to what I had to say, asked me questions about my career and the work I had done, and explained the regulations to me fully. Laws, he pointed out, had to be obeyed, and it was part of his work, as a member of the Government, to see that they were enforced. Nevertheless, it was true that in certain circumstances, special dispensations might be granted. But, he went on, as I allowed myself a small gleam of hope, he did not think that mine was a case that merited such extraordinary consideration. Brazil had all the plastic surgeons she needed. Brazilians, he said a little unctuously, did not believe in interfering with God's handiwork, and the majority felt that plastic surgery's only proper sphere was to correct the effects of injuries or accidents—and for that, he repeated, the services available were perfectly adequate.

He was so convincing that I felt I must argue with him. It was not that I really wanted to practise in Brazil; it was simply that I was sorry at the contrast which existed between the inadequacy of medical facilities, as I saw it, and the great need, and the rigidity of regulations that seemed designed to make conditions worse.

'And yet,' I said, 'there is a child now in your waiting-room—a child who could be beautiful, but has a disfigurement that will certainly ruin her whole life. Yet quite a simple plastic operation could cure her and enable her to lead a happy life. That doesn't seem as though your plastic surgery facilities are adequate. Perhaps they are here in Rio—but Rio is not all Brazil.'

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He looked at me sharply. For a moment I expected him to grow angry. Instead he assumed the air of a man whose whole aim in life is to put right grievances brought to his notice.

'Please tell me about it,' he said. 'This calls for investigation. We do all we can for our children, who will make the Brazil of tomorrow greater than she is even today.'

Encouraged by his interest, I gave the brief facts.

'Yes,' he said with a decisive nod. 'I will have this looked into at once. I do not want you to take away false impressions. I am grateful to you, Dr. Sava, for bringing this to my notice.'

He pressed a push bell and a secretary came in. What was said, I do not know, for though I had improved my Portuguese sufficiently to carry on, as I had with him, a somewhat slow and simple conversation, the normal speed of colloquial speech was quite beyond me—as were most of the finer idioms of the language. But the secretary nodded several times, made a note in the book he carried, and bustled away.

'If you have time, Dr. Sava,' said the Deputy Minister, 'I should like you to wait for my aide's report.'

We talked awhile, the Minister genuinely trying to impress on me all the time that Brazil had a fine and very adequate medical service for its needs—which I inwardly still doubted—and then the secretary returned to make a report, which, again, was beyond my comprehension.

'You will be glad to know,' said the Deputy Minister to me, with a flashing smile, 'that all has turned out well, thanks to you, Dr. Sava. It seems that the parents did not like the idea of an operation on a child so young and have refused all offers. But my aide has managed to overcome the father's objections. We ourselves have made arrangements for immediate treatment.'

He added that she was to go at once to a clinic, where she would be in the care of a plastic surgeon whose reputation extended far outside Brazil.

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'So you see, Dr. Sava,' said the Deputy Minister, sincerely as he held out his hand, 'how wrong it is to jump to hasty conclusions. But I am almost glad in a way that this has happened. It has enabled you to see that we are not quite so bad as we seem.'

It was all said 'in the nicest possible way, so very disarmingly.

'And don't think we shall not give the closest attention to your case,' he added as he politely opened the door for me. 'I assure you that if anything can be done, it will be. We have heard of you, Dr. Sava, and we feel honoured that you want to serve Brazil.'

This I took to be the conventional flowery peroration that no Brazilian can resist. I was willing to accept his words at their face value. And I began to feel sure that his statements about the child were as near the truth as they should have been. The only thing that worried me was that everything seemed to have been arranged in a surprisingly short time—which might have been a tribute to Brazilian efficiency. I sincerely hoped that it was so, for the child's sake. It certainly appeared odd that the father's long-sustained opposition to plastic surgery had been so speedily overcome by a few words from a minor official. . . .

The case became an obsession with me. I remembered that I had, among my papers, an introduction to the surgeon who had been named, though I had not proposed to make use of it. Now it was a godsend. I called at the hospital, paid my respects to the well-known man, and then, as we talked of professional matters, casually I raised the question of the child I had seen the day before.

'I confess I'm interested,' I said. 'It is an exceptional case, and quite frankly I should very much like to see the operation performed, if it could possibly be arranged.'

He looked very pleased. So far he had not heard of the case, but perhaps it had been booked in by his secretary or one of his assistants. He spent a busy five minutes on his house-telephone, and finally shrugged.

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'We have not yet a record of it,' he said. 'Perhaps you mistook the name of the hospital. It is very easy when you are not very familiar with a language.'

Perhaps he was right. I used every introduction I had and spent a busy day trying to trace the child. But no clinic, no hospital, had heard of the case. No doubt, I was told, instructions would come from the Ministry later, and if I wished to see the operation, I should be advised, and the clinic (or hospital) would be honoured for me to attend. . . . My one hope was that the child would be admitted for operation before my departure from Rio.

That evening, I told the story to Oswaldo, and he, who thinks ill of no man, suggested that there was no doubt a good explanation and all would come right in the end. I was still wavering. But he would not shift from his opinion that I should persist in my efforts and practise in Brazil. I told him that I had practically decided to leave, but he would not hear of it. At last he persuaded me, told me he had arranged for me to see one or two of the leading men at the University and hospitals, and added that once I had settled in Brazil, I would never regret it. And again, because he is one of my oldest and dearest friends, I agreed. Since he had done so much for me, it would have been discourteous, to say the least, not to see the people to whom he had secured introductions for me. Next morning I set out, walking as usual, for I enjoyed the street scenes of Rio—and besides, Rio taxis put an undue strain on the slender resources of a British visitor. So I made my way, in the pleasant sunshine, along the Boulevard Copacabana, a fine and notable thoroughfare, one of the principal streets of Rio.

A little knot of people was standing on the edge of the pavement. I glanced idly in their direction, and then my eyes goggled. For what I saw seemed like some fantastic nightmare—until I remembered that this was Rio de Janeiro, the capital of Brazil, where, despite all the noble charm of the city itself, anything and everything can

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happen, except what one would expect in one of the world's larger cities.

In the road lay a man, obviously badly injured. Though I was still some yards from him, I could hear the low moan of pain. He lay in an awkward heap, which suggested to me that one of his femurs was broken, or even both. His head was cut, and he was bleeding freely.

Yet no-one stirred to go to his help. The few spectators seemed, in fact, to have no more interest in him than they might have had in a sack that had fallen from a passing truck. Nor was that the only astonishing thing. The man could barely have been injured like that except by collision with a car; and no motorist could have run over a man in that way without being aware of it. Yet the road was quite clear of traffic. The casualty lay alone, deserted, unnoticed. And, I decided, if he lay only a short while longer without attention, he would surely die.

Common humanity alone would have spurred any normal man or woman to offer help. To me as a doctor the response to the sight was immediate and automatic. I forced my way through the knot of bystanders and ran towards the injured man. As I passed through, I heard someone shout at me, but I paid no attention. The Portuguese words evoked no images in my mind. I was too absorbed by the man's condition to wrestle with the difficulties of an unfamiliar language.

I knelt down and passed swift fingers over him. My guess had been right. Both legs were fractured. The head injuries were severe, and he was showing signs of heavy concussion. What was needed was an ambulance without a moment's delay. But of that there was no sign. And then I remembered that I had not even seen a policeman, of whom there are usually plenty about the Rio streets.

There was extensive haemorrhage from the thigh, and I dragged out my handkerchief to make a pad that I could press onto the wound. I might be able to control it. A heavy hand fell on my shoulder so that, in my



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kneeling position, I only just saved myself from pitching forward. The police had arrived.

Now I expected action. Something would be done for the casualty. No doubt this policeman was pulling me away and shouting at me in words I could not understand because he thought I was some ignorant meddler who might make the man's condition worse—a very proper thought, for it is true in many cases that no attention at all for an injured man is safer than what some people, with the finest intentions in the world, think is 'first-aid'.

As soon as I explained I was a doctor—even if an unqualified one by Brazilian law—all would be well. I groped for words. What little Portuguese I had had quite deserted me. I knew only that it was useless to speak in English. In desperation I tried Italian.

Perhaps it was something in the man's appearance that had unconsciously suggested that I should use that tongue. I cannot, for the life of me, recall a single detail of how he looked. But I do know that he understood me and began talking rapidly in the same language. This is not so surprising as it might seem. There is no people, except perhaps the Irish, which sends forth greater numbers of emigrants than the Italians. One meets Italians everywhere throughout South America, and there, as elsewhere, second and even third generation families retain the speech of their fathers together with that of the land of their adoption.

But if I could now understand what the policeman was saying, it seemed still impossible to contrive any sense out of it. He ignored the man in the road, paid no heed to my demands for an ambulance at once. Who was I? he wanted to know. What did I think I was doing?

Rather sharply, I repeated what I had already said.

'I am a doctor,' I told him. 'This man is critically injured. We must have an ambulance at once—and even then he may die before he reaches hospital.'

The policeman was not interested.

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'Your name? You are not Brazilian. Where do you come from? I want to see your passport—your visa. . . .' And while he talked, a fellow policeman kept hold of my right arm. I did not know whether he was trying to forestall a savage attack on my part or prevent my attending to the injured man.

Suddenly I saw red. I was furious.

'Don't you understand? This man is dying. He's been run over. . . .'

It was no good. Not till I had satisfied this policeman of my identity, and he had examined my papers, would he deign to notice the casualty. An ambulance duly arrived and the man was borne off; but by that time I fear it might have been too late. What happened to him I do not know. What happened to me was that I was taken off to the police station and read a lecture by the officer in charge—who also spoke Italian. I began to believe that all Brazilian policemen are Italians, as all American ones are Irish.

I was told that I had transgressed in every possible way, and if anything like it occurred again I should probably find myself in jail. In fact, if I had not been a foreigner, I should be on my way there now. And he outlined the laws to me—laws that might seem to belong to the world of Lewis Carroll or Edward Lear, but for one thing. That one thing is humanity. In the great nonsense writers there is a streak of loving kindness for man; it is that which makes their work endure. But what these laws lack is any hint of humanity.

Starkly, they run like this. If a motorist in Brazil runs over a man, he must never stop, even though he believes his victim to be dying. Once he stops he becomes guilty and is liable to be sent to jail. His one hope of safety lies in leaving the scene at the greatest possible speed. Similarly, no-one must touch or attend to the stricken man except the police; for if anyone is found in the compromising role of a Good Samaritan, he, too, is liable to

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arrest and imprisonment as at least an accessory. Doctors could claim no exception to this law. They, too, must stand idly by—or disappear.

‘There is no need for anyone to interfere,’ said the officer sternly. ‘We have adequate services for dealing with injuries.’

It was not till then, a little dazed but realizing I had been lucky to have nothing worse than a reprimand, that I remembered those final words. I had heard them—or something very like them—before. They had been spoken by an official at the Ministry of Education, though he had been concerned with plastic surgery, not with casualties.

For a moment I thought I might be dreaming—but there was no mistake. There was I, standing outside the police-station. And there, too, I made my final, irrevocable decision. Not for all the wealth which the Conquistadores believed to be in South America would anything ever induce me to practise as a surgeon in Brazil. For the Brazilians, I was forced to conclude in the light of this latest revelation, were a people (or their governors were) to whom rules and laws were more important than human life, to whom, indeed, human lives had very little value; a people who would deny treatment alike to a mutilated child and a man lying dying in the street; a people who would rather let conquerable disease and deformity kill and cripple than admit help to fight it come in from outside.

Perhaps I judge too harshly. Perhaps I would have changed my mind had I stayed in Rio. But let a man—even my beloved Oswaldo—try to persuade me otherwise than I believe, and I have but to close my eyes to see two pictures that will forever remain etched in my memory. One is of a child, one half of whose face is as a goddess’s while the other is as a monster’s; the other is of a huddled, broken, helpless human being lying in the road and bleeding to death while a policeman argues with me about a passport before a silent, indifferent throng of people. No

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words, no logic, no sophistry can dim those pictures or quench the fiery doubt that they evoke. . . .

That incident, I thought, was the last straw. It was sad to recall, yet it had at least had the effect of forcing me to an inevitable decision. But I was to have one more glimpse of the strange and tortuous ways of Brazilian medical officialdom, an experience that confirmed, as nothing else could, the wisdom of my choice.

Out of courtesy to Oswaldo I had seen the professors, listened politely to them, answered their questions I hope as politely, and told them that, whatever happened, I had reconsidered the matter and, though I was honoured by their offers to let me lecture and teach in their universities or hospitals (but not to operate), I felt I could not stay in Brazil: I had one more call to make—on a minor official at a private Medical Institution. This had been an unexpected appointment. In view of what had happened at the previous interviews and the promises given—to consider my application for registration carefully—I placed no reliance on this last one either. It must be only a formality, I thought, and in any case it did not matter now. Then I had received a letter saying that a decision had been reached, and if I would call on this official, it would be discussed.

Out of sheer curiosity I went. I almost hoped that the Medical Board had decided to recognize me, so that I could politely refuse. But nothing so dramatic happened. I was received with the courtesy that is as natural to Brazilian officials as the air of superior indifference is to the counter-clerks of Her Britannic Majesty's Post Office. He was, he said, in the regrettable position of having to tell me that the Minister, after making every possible concession, could not grant my application. I might remain if I wished, for a time as a guest professor at one of the medical schools: the Minister would feel honoured to assist me if I felt inclined to take that course, but beyond that he could not go. If he made an exception in my case, he

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would have to do so in hundreds, perhaps thousands of others, and the law would be made a laughing-stock. The official was, he added with Latin colour, utterly desolated to have been made the mouthpiece of these tidings. He had heard so much about me, appreciated my abilities so strongly. . . . But—and he was back again in his world—the law was the law.

That I knew. I had seen it demonstrated too often in those past few days.

Obviously no more had to be said. I thanked him politely, rose, and held out my hand.

‘But no, senhor,’ he said quickly and conspiratorially. ‘A moment. I have something else to say—more personal. . . .’

I sat down again, wondering what was coming now.

‘I have a friend, senhor,’ he said, in a low voice. ‘He is, like you, a doctor, and he is already well established. He has offices here in Rio and also at Copacabana, where so many of his patients go. I have spoken to him of you, and he would be honoured—deeply honoured—to meet so distinguished a European colleague. I beg of you, senhor, to go and see him. You will find him in if you go straight from here. And’—he glanced about him and dropped his voice still lower, till it was almost a whisper—‘I do not think you will regret it. You will allow me to telephone that you are on your way?’

Again curiosity mastered me. There was something very queer about this—the man’s voice and manner, his very choice of words, suggested that there was something unusual about this proposal. Interested to find out, if I could, what it was, I nodded and said I should be charmed to meet his distinguished friend.

In less than half an hour, I was being shown into a suite of consulting-rooms that were amongst the most sumptuous I had ever seen, even in the Argentine. They were equipped with everything of the very latest in medical gadgetry, as much, I suspected, to impress patients as for

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use. For this I was more than half prepared. If this doctor had sufficient practice among the rich to justify his having rooms also at Copacabana—where, as an American I met once put it, ‘You have to have a million before you can start in to eat’—he was obviously making money on the grand scale. And when the doctor himself appeared, this belief was confirmed, for he was dressed as only a wealthy South American can dress. On either hand he had a diamond ring. Inevitably his flashing smile revealed heavily gold-filled teeth.

For a little while he was very generous in praising my ability. He was well informed—which added to my suspicions, which so far had no focus—for he spoke of the appointments I had held, the countries in which I had worked, the books and even the articles I had written. By devious routes he worked round to his own practice and its problems. And there was one particular problem with which I could help him, if I would be so good. I told him I would do what I could.

‘My patients are rich, Dr. Sava,’ he said, with a note of pride. ‘For them and their wives, nothing is too good—or too expensive. And many of them, particularly their wives, have plastic operations. Unfortunately, I am not a plastic surgeon. There is no need to tell you, my good Dr. Sava, that one has to be a specialist, a very special specialist, to be able to perform all the operations that a rich and perhaps vain woman may demand. So when they come to me, saying they want this or that done—a face lifted, their breasts shaped, whatever it may be—I have regretfully to send them to colleagues, for I cannot afford to kill my patients, you understand, nor can I risk bad results, for then I should lose my general practice.’

I wondered whether Brazilian doctors did have patients they could afford to kill; by now I was quite prepared to believe it.

‘I see,’ I commented aloud. ‘No doubt the surgeons command large fees.’

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'Enormous!' he exclaimed, his eyes growing round and his hands making an expressive, adulatory gesture. 'It is a sin to see the money going another way.'

'But how can I help you? I can't teach you plastic surgery in a month or two.'

I thought then I had discovered why I had been sent to this man. The official had arranged for me to stay as a 'guest professor' so that I could teach his friend, and as soon as that was done, my permit would be withdrawn. But that was too naïve.

'I suggest'—and his voice dropped, just as his friend's had earlier—'that you work with me.'

I stared at him. 'But—I am not allowed to operate here.'

He smiled at my innocence. 'No,' he said half closing his eyes. 'Officially, that is so. But if the door is closed, does not the wise man who cannot find the key, look round to see if a window is open?'

He paused as though I should see the light. But his Confucian-sounding aphorism suggested nothing to me. Seeing I was still in the dark, he shrugged a little impatiently and resumed.

'It is so simple, Dr. Sava,' he explained. 'The patients come to me, and you are present when I examine them. I defer a decision and we afterwards discuss the case. If we agree to the operation, then I accept—and you perform it. Does not one man at an operating table look exactly like another? Certainly the patient would not notice.'

'I see. And what would I get for this—er—association?'

He seemed to take that as meaning that I was ready to talk business with him, for he leant forward eagerly.

'I pay you a salary—so much. And on the fees a small commission.'

'How much?'

He smiled. Bargaining was something he understood. He named a figure for the salary that would have been rejected out of hand by any English general practitioner.

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The commission offered was no more than twenty per cent, and I had no means of judging what that might represent.

'That would be all very well,' I remarked, as though I were trying to raise his bid by putting up fresh objections, 'so long as all went well. But what happens if the patient dies, or anything serious goes wrong?'

'But that is impossible! A plastic operation does not go wrong. Patients do not die.'

'I assure you they do sometimes—even in America.'

He felt it was his turn to grow tough, and he was engagingly frank.

'If that should happen, then, of course, the truth comes out, and it becomes known that you, an unregistered surgeon, operated.'

'Very nice for me.'

I stared at him blankly. His proposal was so outrageous that I had no reactions at all. I did not feel astonished or dumbfounded or shocked or insulted. It was simply part of this nightmare I was having in Brazil; and like a dreamer I should experience no real emotion till I woke up and it was all over.

Quietly I rose. 'I'm sorry,' I said. 'It's impossible.'

'I will increase the terms. I will raise the sum so that the increase will be worth the risk.'

Now at last I began to wake up. A great light dawned on me. All this was part of the scheme, and as the details became clear in my mind, I heard him confirming them.

'Perhaps the proposal sounds a little unusual, my dear Dr. Sava, but I assure you it is not at all exceptional. There are so many doctors in Brazil who cannot practise yet and will not be allowed to do so for years. Meanwhile, they must live, and it is surely better to live by keeping oneself in practice than by other means.'

So that was it. Physicians and surgeons of undoubted talents, some brilliant, came to Brazil in hope, and determined to qualify—perhaps because they could not afford



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the fare back. And they were forced by these rigid Brazilian registration laws into poverty, so that men like this one before me could prey upon their love of their profession. They were unfortunate men, trapped into prostituting their brains, their specialized skills, and their knowledge, just as in the past, if not still, women had been forced by duress and poverty, by isolation in a strange land, to prostitute their bodies in the brothels of some South American cities.

But I was free. I was under no threat of necessity. There was England. There was America. There was Australia. There were other countries in the world besides these in any of which I could practise my profession openly for an honest living.

I stood up and faced him squarely. I searched my limited Portuguese vocabulary for the word I wanted—and, to my joy, found it.

‘Doctor,’ I said—and for the first, and I hope the last, time I tried to make that title sound like one of contempt—‘Doctor, I am not a whore.’

I walked out. Rio was beginning to dance with lights, but they no longer held any attraction for me. I was conscious of one thought, and one thought only, which dinned through my head with the thumping persistence of an old-fashioned steam-pump.

I must get out of Brazil; I must get out of Brazil.

## July



**M**y account of the events in Brazil, in many ways the most extraordinary during the whole of my year at large, has distorted slightly the neat chronological plan I had intended in this book; for though I have presented them under the heading of 'June', it was well into July when I finally made my decision to leave the country. But this is the very essence of life, which takes no heed of the artificial divisions we mark on our calendars, and in my memory the whole of my Brazilian experiences are one, not to be divided to accommodate themselves to an arbitrary scheme. For a period, in fact, time stood still for me in Rio, and I enjoyed a complete and peaceful rest; later time 'galloped withal'. Incident succeeded incident with startling rapidity, and the final result was that six or seven weeks seem to be, in retrospect, no more than a single month.

August, then, was already in sight when I booked a ticket by Pan-American Airways to New York. I had no special reason to go there again, but I was filled with a desire to leave Brazil behind with all speed, and New York was the most convenient destination to choose. There I could take thought again and decide what the next step was to be. I should go from the beginning of the southern spring to the end of the northern summer, and perhaps there was something symbolical in that fact. My grace year was running out fast.

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Before I go on, let me look back a little. I have written feelingly about Brazil and its strange ways, and I saw much there to incense and sadden me. It is true that I left the country with disappointment. All this is beyond dispute, and I do not think I have in any way over-coloured my picture. But I may have given the impression that everything and everybody in Brazil was unfair to me and that the weeks I spent there were an exquisite torture.

This is not so. It was, more than anything else, Brazilian medical officialdom that disappointed me. But then to a greater or lesser extent, officialdom has that effect on me wherever I may find it. The official is the least human of human beings, and the smaller his standing, the less his humanity. Power corrupts—how true that is! And no-one does it corrupt more than the petty official, who delights in exploiting and exhibiting the brief authority in which he has been dressed and whose vision is so myopic that he cannot look beyond the exact letter of his laws and regulations to the spirit behind them.

It is, as I see it, in Brazil that this ignoble spirit reaches its climax. As a boy I knew and saw something of the *Okhrana*—the Tsar's hated secret police—and of the innumerable small bureaucrats that spawned in the Russian Empire like duckweed in a stagnant pond. Later I was to see—and sometimes to suffer from—the petty tyrants of the Italian Fascists and the German Nazis. In many ways, of course, the practices of these went far beyond anything I experienced in Brazil. But the difference is one of degree not kind. Underlying all is the same rigid adherence to strict principles, the same denial of elementary rights of mankind, the same concern with safeguarding the privileges of a favoured group or groups, no matter what the cost.

Brazilian medical officialdom, then, I dislike, not because it is uniquely Brazilian but because it is a particularly offensive expression of a universal system that I

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detest. It did not injure me materially or financially, nor did it mar in any way whatever future prospects I might have. But it revealed to me that it was quite capable of doing all those things to people who were vulnerable. When I thought of Dr. Abrams I was at once angry and sad; when I remembered the proposal that had been made to me by that successful doctor, a proposal so obviously made with official connivance, I felt that no man could think of a deeper degradation; and when, finally, I recalled a dying man on the Boulevard Copacabana, I doubted very much whether if I had remained in Rio I could have been happy.

So much for the shadows of my picture, and I admit that they dominate it. They represent experiences that I would not again willingly undergo. But also there were grateful highlights that relieve not a little the final impression of brooding gloom.

Indeed, in some ways I am grateful to Brazil. It showed me, once more, the infinite variety of human nature, and if the new glimpses I had did little to ennoble the character of Man, at any rate they have helped me to maintain a balanced judgment and reinforced my faith in those things which are good.

There was, for example, my reunion with Oswaldo. Sometimes, recalling those weeks, it seems impossible that he should be of the same race and a distinguished citizen of the same country as those other men I met whose only creed rested on the foundations of Power, Self-Interest, and Greed. For Oswaldo is the direct and complete antithesis of these principles—if that is not too fine a name to give them. He is large-hearted and generous, even to the point, as I have seen, of trying to see a good that I am sure he did not admit in his spirit, in the evils of the system of his country. To Oswaldo, humanity comes first, as I myself had experienced years ago in Florence; he accepts as a fundamental human obligation the duty to help one's neighbours; a duty that is also one of man's

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greatest privileges. Often I have wondered what he would have done had he been confronted with that casualty in the street. Would he have accepted the customs and rules of the country in which he had been born and which had showered honours upon him? Or would he have considered that the basic laws of humanity are greater than the laws which man makes for himself? It is one of those questions to which I can find no satisfactory answer—nqr, I think, could Oswaldo himself if it were posed to him, for what a man thinks he will do, and what he will actually do, when faced with a sudden crisis, are often two very different things.

Fine as Oswaldo's character is—and the fact that he has remained unspoilt by fame and wealth in a country that adulates position and riches is the greatest proof of that—I do not think for a moment that he is a complete and singular exception to the rest of his countrymen. The events and conduct that shocked and saddened me I found entirely in one particular stratum of Brazilian society, as I have already pointed out; the tragedy is that it is they and their outlook that dominate the country. Even if he were that unique exception, and the behaviour of officialdom did, in truth, reflect the national will and character of Brazil—a proposition I would not uphold for a moment—there would be room for faith and hope in his standing apart from it.

But let me leave this philosophizing and descend to a more personal level. I had another and more private reason for being grateful to Brazil. It was in Rio, after months of fruitless search and frustrated plans, that I found true rest and recreation—and it would be better to write that latter word as re-creation. The gentle climate had reinvigorated and restored me. I was—and I could say it soberly and truthfully—no longer a sick man. My heart no longer grimly reminded me of its troubles whenever I exerted myself. Idleness in unfamiliar surroundings, and among people who had not the slightest claim upon me,

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had enabled nature to do her work; and, as a doctor, I know that nature is the greatest healer of all, and the finest doctor is he who creates the conditions in which she can work unhampered.

With physical restoration had come a welcome re-animation of mind and spirit. The future was no longer represented to me as a dark and sinister question-mark. I felt I could face whatever problems it might bring clearly and courageously. It was the loss of that potential power that had, in the past few months, alarmed me even more than my physical condition. I had slipped into the state of hardly daring to think beyond the immediate present, of living for the day and the hour and—not caring what came next. It was delightful to realize that I had lost all that.

Yes, I am grateful to Brazil for these benefits which she conferred on me. No doubt I might have found them elsewhere, even perhaps in greater measure. But such speculations are beside the point. This re-creation came to me in Rio, and Rio deserves and receives my thanks. A starving man who has been given half a crown to buy food has no right to think that another benefactor might have done as much or even handed him five shillings; the man who gave when need was greatest is he to whom gratitude is due.

It is that which I shall try to remember when my thoughts turn to Brazil. I know that the other memories are ineradicable and will haunt me always, but they are like the pains of a severe illness; their pangs will remain, but softened by the joy of recovery.

There is one other memory, too, I shall always have of Brazil. I have to write it down as my one great failure. I do not mean that I failed to secure registration and acceptance there, for I do not believe that I ever entertained the idea of permanent practice there with any great enthusiasm. No, my failure was another, more personal kind. I have, as I have written elsewhere, visited many countries; I have lived and worked in quite a

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number of them, adapting myself to strange ways and to unfamiliar tongues. Yet of them all, Brazil is the only one with whose people and way of life I failed to come to terms. In a way I think that hurt my pride far more than the cavalier treatment I received at the hands of the authorities. But perhaps if I had stayed, if I had mastered the language sufficiently to grow friendly with the ordinary people in the streets and the shops, the factories and the fields, I might not have had to record this failure. It is, after all, something that concerns me alone—and perhaps it is not so bad a thing to have one's pride hurt occasionally, one's confidence in one's powers shaken a little. The gateway to disaster, for surgeons as for others, bears the legend 'over-confidence'.

It did not take me long to make my arrangements to leave Rio. I was travelling light. I had no-one's convenience to study except my own, and I had no professional or business affairs to put in order. To book the ticket to New York and board the plane at the airport involved little more than hundreds of thousands undertake in their daily journeys to and from central London. And I had only two farewells to make, one to Dr. Abrams, the other to Oswaldo. No-one else would notice my going, unless it were my recent medical friends, who might chuckle triumphantly at having disposed of another pestering foreigner.

Abrams smiled and nodded when I told him I was leaving the next day.

'I'm not surprised,' he said. 'I think I should have gone away myself when I found out the true state of affairs—if I'd had the chance. But you know when I came here and why. There were few places I could have gone to during the war, and if I'd moved on to one of the other South American republics I might have jumped out of the frying-pan into the fire. And then, when the war was over—well I'd dug in. I'd just got to the stage of being allowed to start taking exams., and I'd suffered so much, and so

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had my wife to arrive that far that I simply couldn't give it up then. Pride, perhaps—silly stupid pride. I often ask myself if it was worth it, and whether anyone but a damned fool would consent to stay on these terms. I don't suppose I shall ever find the answer.'

He paused thoughtfully and then held out his hand. I had only looked in to say good-bye.

'Good luck, Sava,' he said. 'You don't know how lucky you are. And if you'll forgive me I'll add a word of advice. Don't throw away the substance for the shadow—and don't get frightened of shadows. I did—and I know.'

I grasped his hand and murmured good-bye. His parting words surprised me. Now, at this moment of good-bye, he had allowed bitterness and even a little envy to creep in. It was almost the first emotion he had permitted himself to show since I had met him again here in Rio. Perhaps he thought that he was unlikely to see me again, that I should have no chance of repeating his words inadvertently in quarters where they might do harm to him; or perhaps—and I thought of this a trifle guiltily—perhaps my visit had unsettled him, reminded him of what he had lost, and, it might be, revived a nagging doubt that his flight from England had been foolish and panic-inspired. But his words sobered me. He was right. I had much to be thankful for, not least the freedom I enjoyed.

That last evening I spent fittingly with Oswaldo, my oldest friend. He was as charming as ever, showing no signs of resentment that I had chosen to ignore his advice and settle in Brazil.

'It's a pity you didn't look me up as soon as you arrived,' he said.

'I couldn't,' I pointed out. 'You weren't here.'

'True. But I was only on holiday. If you'd dropped me a line, it would have been forwarded to me, and I would have come back at once.'

Like everything he said, this was sincere. He would have travelled across the world to meet and help an old friend.



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'Thank you,' I said. 'I would have liked to see more of you.'

'Yes. And I of you. Besides, I could have taken you round a bit, and shown you some aspects of life in Rio that I think you've missed. If I'd done that, I think you might have got a rather different impression of us. As it is, I more than suspect you're taking away a lot of wrong impressions—the worst kind of wrong impressions, those that are based on half-truths.'

'I can't say anything about that. Perhaps I don't think so badly of Brazil as you imagine.' I smiled. 'I do know this, Oswaldo—you should never judge a country by a few officials!'

'You're right. That's always a safe rule. But let's not be depressed on our last evening together, George. Neither of us is getting any younger, you know, and we may not cross each other's paths again. In spite of what you say, I don't think you're likely to come to Brazil again for a long time. He rose. 'I've something to show you. Follow me.'

He led me into his studio, a room from which, as a rule, visitors were rigidly excluded. On the easel was a half-finished portrait of the wife of a Brazilian notability. Against the wall was one, recently completed, of another lady eminent in Rio Society. I studied these works eagerly. Oswaldo had become the painter of the rich, and an artist who attains such a position is open to the strongest temptations to lose his integrity, for the fashionable portrait-painter can so easily become the rich man's flatterer. But in his work Oswaldo had remained as impervious to change as he had in his character. His style had, of course, matured; the tentative, excited strivings of the brilliant student had evolved in the accomplished measured technique of the master. But this was only a change of detail and one that I would have been surprised not to find. Otherwise there was still the virility I so well remembered, the stern refusal to compromise with his own

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vision. His sitters did not come to him to be flattered, to have their features transformed into some idealized version of themselves; they came to obtain masterpieces of portraiture—and if these two, the one finished, the other still incomplete,—were typical examples, they got what they wanted.

I murmured something congratulatory, feeling that from me it was rather an impertinence, but he hardly seemed to hear. A curious effect was beginning to take hold of me. The smell of the paint and the old and the prepared canvases, the seeming confusion of everything on the floor, the shelves, the small table in the corner, the model's throne at the far end, the chair on it half covered by a rich, red velvet cape lying untidily as though it had been carelessly cast off by the last sitter—the combined result of these and innumerable other small, barely detectable stimuli, was to transport me in mind and spirit back to the studio in Florence where he and I had first met, and where I posed for him. I took a deep breath.

'Yes,' he said, 'I know what you are thinking about—Florence. Almost every day I work here, and yet sometimes it has that effect on me too. They were hard days, George—harder for you, perhaps, than for me, though heavens knows I had enough. And yet'—he paused, a far-away look in his eyes—'and yet I often feel that they were the happiest days of my life. To struggle, to strive, to see your ambition always tantalizing you a little way ahead but always avoiding capture—how much more stimulating and satisfying it all is than success! You know, George, success is the dulllest thing in the world. I think that is why you are so restless. You have won success in your own line, and it is not quite all you imagined it would be in the days when you were overjoyed to model for me for a few *lire*. Now you are roaming the world to see if you can find what you believe you have lost. But it is hard to give up all you have won and begin at the beginning again. Am I right?'

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His eyes were keen and lively.

'Perhaps,' I replied slowly. 'It might be that. But then I have never had the success that has come to you. It is not to be expected anyway.'

He smiled cryptically, and then—again by some magic engendered of the studio air—the flood gates of memory were thrown wide open and the dammed-up waters of the years poured forth. *Do you remember...*?

We talked without stopping far into the night. In the adjoining room were comfortable chairs, drinks if we felt like them, every sort of luxury. But by tacit agreement we preferred to remain where we were amid the smells and disorder of the studio, each one of us perched on a hard wooden chair. So we had talked in years gone by; so we talked now. Brazil was forgotten. We were back in Italy and each was again a bright-eyed student. . . .

It was nearly dawn when I made my way back to my apartment, tired but happy. I knew I had little enough time to snatch a little sleep and prepare myself for the departure of the air-liner. But that did not matter. Without troubling to undress I dropped into a big easy chair and fell asleep; and I can recall, with a curious vividness, the last conscious thought I had before I fell into my doze. How odd, I told myself, that twice in a few months, the same thing should have happened! That Italy should have come to life again for me and the shadows of my student days gathered round me. For that is what had happened—here in Rio in Oswaldo's studio, and, four months before, at the Conference in Turin. . . .

By a last-minute dash and scramble, I managed to catch the plane. There was no-one to see me off. Oswaldo had too much tact to do so, for he would have known that a formal good-bye after that talk would have been a dreadful anticlimax. The glow of our conversation still warmed me. I found myself wondering whether Oswaldo had deliberately schemed it, guessing what effect the studio would have on me, and hoping that it would turn

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my thoughts from the unfortunate side of Brazilian life, so that I could take with me, as my final memory, something I should cherish. Whether planned or not, the end had been secured.

I looked at Rio through the porthole, a great city rapidly growing smaller as the plane climbed, and I found myself feeling a vague regret I had not expected. The Sugar Loaf Mountain brooded imperturbably like a monument of eternity that was there before Rio was born and would remain long after Rio had disappeared, over the city and the bay. A lovely, impressive sight. It seemed a pity to leave it, this city of so much outward beauty that luxuriates in perpetual sunshine by day and decks itself with ten thousand lights by night. Yet in my heart I was glad. It would be an utter contrast to come to the hot, stifling, exhaust-choked canyons of New York City's streets after Rio, but I looked forward to it. There I should be free.

It was in New York, after a day's rest, that I realized precisely what I meant by thinking I was free. It was the symbol of my return to the world of the fit in body and in mind. I could, as old Omar put it, cast off 'past regrets and future fears'. Above all, I was free to work where I would. That was essential. I could not go through the rest of the year without work. I had been idle long enough—and I had come to recognize that for me my work was essential.

'To struggle, to strive, to see your ambition always tantalizing you a little way ahead . . .' that is what Oswald had said. Only now in New York did I understand how truly he had spoken. For that was life itself: always to have something ahead to beckon you on.

Eagerly I set about reviewing my position. I must work—that was now essential. But I did not want to return to the old familiar round at once. Prudence alone insisted that I should not, the moment I felt fit again, take on my accustomed responsibilities. Besides, I argued, a little

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casuistically, there were still five months remaining of my year at large, and I might as well wring from them as much as I could.

England still remained 'home' to me in all my thoughts, yet I would not return there yet. The obvious alternative was to secure some appointment, the humbler the better in the mood I was in to work without undue responsibility, in one of the Eastern States of America. The qualification I had was valid in any of them.

There were plenty of friends, too, in the East to whom I could turn for help. But—and I say it without the slightest malice—they were just the difficulty. For I knew what it would be if I asked their advice and assistance in seeking an appointment. They would think of big hospital positions, of associate professorships, of teaching and lecturing—and those were what I wanted to avoid. Nor, in their kindness, would they listen to my pleas. They would persuade and cajole me out of my resolution to remain in obscurity for the time being. Perhaps they would bear down my arguments and I should find myself in a position of some responsibility. The old difficulties faced me, but they no longer daunted me.

There was, too, another reason that made me reluctant to consider working in the Eastern States. August had still to come—and August in New York or Washington can be very much more trying. The heat over, there would be a month or two of winter before my year was over. That, too, was something I did not wish to face.

Automatically my thoughts turned again to California. To spend the next five months there to round off my year seemed to me to be ideal. But I had already been told that I could not practise there unless I was prepared to spend that probationary year as an intern in one of the hospitals. The barrier seemed insurmountable. I could not, it seemed, have everything at once.

But as the days went by, the temptation grew. My desire to visit California became overwhelming. I tried to

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persuade myself that, after all, I was under no obligation to work, to find every reason why I should, and none why I should not, go to California. The result was what was to be expected. I found myself flying to Los Angeles.

So far I had no clear plans. I was relying on my luck, hoping that I had returned with my health. For a few days in the soft climate of the west I was happy, and then the itch to work returned, not to be denied. With great solemnity I began to consider the position again. But it was only an attempt at self-deception. I knew that my mind was already made up.

I had decided to become an intern.

To any rational person that decision, I am sure, must seem utterly and completely fantastic. Put in the baldest possible way it meant that after nearly twenty-five years of practice, during which I had, after all, not been entirely unsuccessful, I was content to go right back to the beginning again. Moreover, the work of an intern is hard, as I shall show later on, and I am no longer a young man, while I was also only just recovered from a poor condition of the heart—which might easily return again.

But there was another side to it. My heart was fixed on ending my year at large in California, and meanwhile I must maintain myself. The State Government would not recognize me unless I did my year. I had no alternative but to become an intern if my other wish was to be fulfilled. And there was no obligation on me to serve the full twelve months. If I found the going too hard, I could always resign. It was worth trying. It might very well be both stimulating and amusing—and, I did not doubt, at times tormentingly trying.

There is in this country a great deal of misconception about the American intern system and so it may be as well briefly to explain it. One error must be crushed at the start. An intern is not the exact counterpart of a house-surgeon or house-physician in England. It is true that both perform very similar functions, and both are, as a

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rule, young, recently qualified doctors gaining experience by full-time service in a hospital. But whereas it is not necessary for a British doctor to have served as house-surgeon or house-physician before he starts in full practice on his own, a year's service as an intern is, at any rate in most States, obligatory on the young American graduate. To use the phraseology of the old craftsmen, the intern is almost a precise parallel of the 'journey-man', midway between the qualified apprentice and the master.

That, at any rate, was the difference between British and American custom at the time I was in America, but now it has been officially decided that a year's hospital service shall be compulsory for all newly qualified doctors in Great Britain during which period they will have only provisional registration. The change is, I think, all to the good, if only because the modern general practitioner is so much more dependent than his predecessors on the resources of the hospitals, from diagnosis to special treatment. Apart from that, the gain in all-round practical experience is invaluable.

And so, to return to my narrative and to the language I used a few lines earlier, I was to revert to journeyman after having been a master for many years.

I soon found that there would be no difficulty whatsoever in realizing my new and somewhat odd ambition. On the contrary, I could pick and choose between several different hospitals. For America is experiencing a dearth of interns, without whose activities the vast and intricate American hospital system could not be maintained as a going concern. These hospitals, many of them of gigantic size, need a large resident staff, not only because of the enormous numbers of patients under treatment but also because American methods tend to be more intricate than British ones (another point to which I shall return later). For this, let it be quite frankly admitted, interns provide a source of cheap labour. The pay is, as a rule,

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somewhere around seventy-five dollars a month—say twenty-five pounds—which, even when free board and lodging are taken into account, is barely adequate at the present level of prices in the United States.

Every year some five thousand internships fall vacant in American hospitals—and the number of men available to fill them averages between three and four thousand, leaving a gap that is almost impossible to fill. In recent years, too, a fresh problem had arisen, for the armed forces were, under the new rearmament plans and the claims of the Korean war, taking anything up to thirty per cent of the young men who would normally be available. It is not surprising then that there is scarcely a hospital in the United States that does not grasp eagerly at anyone with the necessary basic qualifications who offers his services as an intern.

I had presented myself for interview, with others, at the hospital with some misgivings, for I had fully expected to find myself a greybeard (figuratively) among aspiring youth. I was quite wrong in my expectations. True, there was a preponderance of young graduates. But there were others who were certainly not young. There were displaced persons admitted to America under one or other of the various international schemes for dealing with Europe's disinherited, and some of them were not a little older than I. Nor was that discovery the only surprise, for there were, too, older Americans, some of whom had held good positions in other professions in the Union, including a few men with specialist qualifications. Why such men as these should be seeking internships when the country as a whole provides an insatiable market for doctors I was at a loss, at first, to understand. It was a circumstance that not only astonished me but also gave me confidence. If men of this calibre—and Americans at that—were seeking these appointments, then my idea was not so outrageous as it had seemed when, having made it, I came to reconsider it.



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The explanation of this strange state of affairs turned out to lie in the peculiarly favoured position of the State of California. I had long known that it seemed to be an El Dorado to all Americans. Everyone's ambition appeared to be to settle in this State of eternal spring and surpassing beauty and richness. But I had not known that it exercised precisely the same magnetic appeal on doctors. They came from the east, the middle west, the south, often abandoning, as I have said, good appointments or fine practices, and they considered the year's internship a not unreasonable price to have to pay for the benefits they expected to receive from working in California.

There was no reason to doubt this explanation, which came to me from a knowledgeable official of a hospital, and I was prepared to admit that this inrush of doctors justified to some extent, as he claimed, the refusal of the State to recognize any qualifications but its own—a regulation that I have already criticized in an earlier chapter, but must deal with again, now that it has become an important factor in my story. This official contended that without this protection California would be swamped by immigrant doctors from other parts of America, producing conditions that would make good medical work almost impossible, since there would be cut-throat competition for patients.

No doubt there is a case to be made out on these lines. But as he put the points to me, a chord of memory stirred. I had heard something very like that argument before—in Brazil. There, too, a barrier had been put up to prevent the country from being swamped—and I could not say that there the results had been particularly happy. True, if conditions were actually as they were represented to be, then certainly the State had to protect itself, not only for its own interests but also for those of other parts of the United States, which would, I gathered, stand in danger of being denuded of doctors. Nevertheless I doubt whether the particular rule that California has adopted—that of

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making everyone, experienced or inexperienced, foreign specialist or newly qualified graduate, serve twelve months as an intern—does gain the desired end.

Like the Brazilian law, though, of course, much less harshly and certainly more fairly, it is too rigid. It suffers from the defect inherent in all broad, sweeping regulations in paying no heed to the infinite variety of the human material with which it is concerned. A year's internship of itself can neither turn a bad doctor into a good one, nor can it demonstrate a general fitness to practise. If it was preceded by some sort of selection, the year's internship might do something to ensure that California obtained only worthy doctors. But it is not. There are too many vacancies in the hospitals for the authorities to dare to impose any limit to numbers. And this fact might suggest that perhaps the danger of California's being overpopulated by doctors is not so great as is imagined. Surely if it is, a better remedy would be to borrow a leaf from the British National Health Service and impose a maximum limit on the number of doctors who could be licensed to practise in the State at any time, that number being adjusted as conditions change—but perhaps this simple suggestion is too socialistic for American individualism to swallow.

In the months that were to follow I had in fact ample evidence that the system gave no guarantee whatsoever that the qualifying doctors would be the best available. The year's internship is the only rigid requirement imposed; the authorities have otherwise wide latitude to recognize initial qualifications, such as those of other countries. So I was to see men with diplomas from quite inferior and minor European universities doing their internships and in due course being accepted unreservedly as fully qualified Californian doctors. Insofar as it is selective at all, the rule works in quite the opposite direction, since it excludes only those who, for whatever reason, refuse to serve the probationary period. So California

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might deny itself the services of a world-famous professor who, though he might wish to work in the State, might well feel it an indignity to serve as an intern. A doctor of international reputation, whom any hospital or university would feel honoured to have on its staff, is not likely to choose California if he knows that he will be expected to descend for a year to the first rung of the ladder.

But these considerations of medical policy were not my immediate concern. It was only later, in fact, when I had had experience of the system in practice that I was able to see its defects so clearly. The point that has to be made here is that I was offered and accepted an internship at the princely salary of seventy-five dollars a month, with free board and lodging.

When I had returned to my apartment, wondering whether to consider myself lucky or not, the memory of my farewell evening with Oswaldo came back to me. He and I had, for an entrancing moment, regained our youth, so that the very studio had seemed filled with the atmosphere of Florence. Now, within a fortnight, I had accepted the most junior of all medical appointments, a beginner's job. It seemed almost as though I were starting to live my professional life all over again. This was an odd and rather alarming thought—but it vanished when, on glancing in the mirror, I noticed the thinning hair, the lines on my face, and the slight droop at the shoulders that middle age had brought. There was nothing about my stance, in fact, of the muscular young man who had caught Oswaldo's eye and whom he had selected as the model for the picture that brought him his first recognition!

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Let me, before I begin to set down what might well be entitled the Confessions of an Intern, make one vital point perfectly clear. In what follows I shall have occasion to offer some criticisms of the medical profession in America, as I have already done of the registration laws of the State of California. What I shall say is no more than my own personal opinion, and it is offered in no carping spirit. Among American doctors I have many good and generous friends, whose feelings and loyalties I respect, and whom I would never wish to offend, for at their hands I have enjoyed much hospitality, many kindnesses, and unfailing help. I believe that they will not take anything I may say amiss, even though they may not agree with it; indeed I am certain that they will welcome a view that may seem strange and even perverse but is based on experience in other lands. For there is, perhaps, more nationalism in the practice of medicine than in any other profession, and those nurtured in one tradition take its tenets so much for granted that often they are blind to faults and weaknesses. I well remember how, on coming to England after working on the Continent, many of the customs of my new British colleagues appeared to me to be not far short of madness. But now, no doubt, my conduct too is cribbed, cabined, and confined by those same English rules that once amazed me. Indeed, at the Conference in Turin, one Italian doctor, who had been a

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student with me at Florence, broke into a roar of laughter after I had, in a friendly talk, held forth at length on some point of medical etiquette. As he wiped his eyes, he remarked: 'But, my dear Sava, what a very English doctor you've become!' It was something that had never occurred to me, and it opened up some interesting and amusing lines of thought. But this is by the way. What I wish to emphasize is that I have not dipped the barbs of my criticism, such as it is, in poison.

And with that let me return to my intern's story.

I have been told that at one time, and for all I know still, newly joined midshipmen and sea-going cadets in the Royal Navy were known as dogs' bodies, and that they were looked upon as the least of God's maritime creatures. The American intern is in much the same position. He, too, is a dog's body, a thing of no account, a man who may be commanded by all but can himself command none. On his shoulders falls all the burden of hospital medical routine. He is there on the spot to do what is needed to be done whenever it has to be done, and when there come to him, as frequently happens, tasks and duties that, by law, only a doctor can fulfil, he does them, since he has the legal status; but that is the only recognition he will ever get of the fact that the State has accepted his qualifications as a doctor and that, in the eyes of the law at least, the most famous specialist on the staff and he have equal standing.

I knew that the job before me was going to be grim. For hard work I was ready. I was fit again, and I am one of those to whom hard work seems a physical and mental necessity—for which, by the way, I take no special credit. Nature made me like that. What was far more frightening to me was the problem of personal relations. For years now I had relied on my own judgment, made my own decisions, given my instructions and expected them to be carried out, developed my own ways of doing things, lecturing and teaching. Now for a year, if I had the

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strength, I had to forget all that. Every minute I was on duty I would have to remember that I must have no opinions of my own—or, if I had them, I must keep them to myself, certainly I must not question any order given by one of the resident surgical staff, even if it should seem to me, in the light of my own particular views—or prejudices—of somewhat dubious value. My views did not matter in the slightest here. I felt I should have to repeat that to myself all day long. It might be true that little more than a year ago I was being highly paid by an Eastern University to convey those views to students, and to graduates as well. That was certainly something that I must not mention even in a whisper.

So, after many reflections such as these, I began my new career. I was prepared for shocks. In the late forties one is less adaptable to new conditions than one is in youth; one has established habits of which one has long since ceased to be consciously aware; and I was quite ready to find that, for all the care I might take, some of those habits which the years had ingrained in me would land me in trouble.

For all that, I was entirely unprepared for the first shock that struck me. I had been told to report to two resident surgeons, who, I was informed, would be my immediate superiors, and to whom I was to consider myself personally attached. I went to the room that had been indicated me, aware of a growing curiosity to see those two men in whose power I was to be for the next twelve months.

They had their backs towards me as I entered their room and, deep in conversation, they did not turn at once. But when they did I tried my hardest and not wholly successfully to repress a gasp of astonishment. Nor were they less astonished than I. They stared at me, speechless in a mixture of amazement and embarrassment. For I knew these surgeons, as they knew me. Only when we last met our positions had been very much reversed, for

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then I had been their professor and they had been my post-graduate students improving their knowledge of plastic surgery.

'I'm the new intern,' I said, rather weakly and like a small boy introducing himself.

'Well,' said one in a slow drawl that I remembered well, 'what d'you know?'

Yet once they and I had grown used to our new relationship\*(which, I kept assuring myself, was only temporary; it was like whistling in the dark to keep one's courage up), the arrangement turned out very well, and certainly better than conditions might have been if I had been attached to a surgeon to whom I was a complete stranger. When they gave me orders, as they had to do, they did so in the most tactful manner possible, and often though they made a show, for appearance's sake, of giving me detailed instructions, their real intention was to say 'We leave the case to you, Sava.' And that made things very much easier for me—and, I hope, for them. It was an example of typical American courtesy at its best, and I am forever grateful to them for the way they treated me. I can well imagine what might have happened to some professors I had known if, a year later, a couple of their ex-students had found themselves in a position to order them about!

In the hospital, of course, the normal pattern of behaviour towards interns had to be observed. All interns were alike and treated alike, whatever their antecedents. They were dogs' bodies, and if anyone wanted to kick them, he could do so and none could complain. But no-one kicked. No-one seemed to want to kick me. Indeed, if the general behaviour of the medical and surgical staff towards me is typical of the way interns are treated in America, then I can only say that most of the grisly stories I had heard were of the same order as those told to new boys at school. I cannot, of course, speak of what goes on in other parts of America, or even in other

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hospitals, but I can say that in the one to which I was attached there was nothing I could see to which any intern, no matter how green, could take exception. They were worked hard, sometimes gruellingly, for the American doctor, and especially the American surgeon, never spares himself, and he expects his juniors to follow his example. There is nothing wrong in that.

The hours some of these surgeons worked and the amount they undertook in a single day sometimes appalled me. I am not now speaking of any personal burden these activities may have laid on me; I refer only to the general principle. Sometimes I found it incredible that any man could work so hard in the theatre (which in America is the operating-room) and retain to the end his delicacy and sureness of touch. I myself had worked as long and as hard after bad raids when I was E.M.S. surgeon during the war; but that was not every day; and these men seemed to take such herculean efforts in their normal stride.

But this is running away from my theme. I have said that in the hospital, even to those who, like my two immediate superiors, I was known, I was treated as any other intern, and of that I was glad, for I should have hated to be singled out for special favours. But once the hospital was left behind, I was accepted by these men as their equal. Within a week I found myself the guest at a party given by one of the most distinguished surgeons on the consulting staff of the hospital, a man with whom I had spent many interesting hours on my previous visits to the States and with whom I had corresponded regularly on a topic that was of mutual interest to us, as plastic surgeons. He greeted me at once by my first name—though only five hours before he had been perfunctorily giving me elementary instructions on handling a case before a group of nurses. Within a few minutes, when the talk had drifted round to 'shop', he was discussing an interesting case in our joint speciality in the old way. It was a pleasant indication not only of the fact that my



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internship was accepted by these doctors as a forced concession to a rigid rule, but also of that easy-going informality and taking a man for his own sake rather than for his professional rank, which is so pleasant a feature of American life—though sometimes alarming to those who have grown accustomed to the more stratified nature of English life.

Quite soon, therefore, my apprehensions began to relax. I felt I had no very special need to watch my step so far as the medical staff was concerned. So long as, in the hospital, I did my job as an intern should, observed the proprieties of conduct and showed the accepted respect of junior for senior, there was little I need fear. If I could control my somewhat explosive temper, all would be well. The whole art lay, I found, in simply remembering who and what I was for the time being—which, after all, is not a very heavy task for a man to perform.

This is not to say that there were no difficulties or that I did not experience some moments of tension, under which, I regret to say, I occasionally broke down and said or did things that I should not. But these outbursts invariably occurred with the nurses. Between nurses and interns there existed a state of cold war, which constantly produced its incidents—and it was not only I who was concerned in them. There is, too, one other generalization I must make, though with the warning that generalizations must never be interpreted as invariable laws. By its very nature a generalization is subject to innumerable exceptions. No doubt it just happened that way, as the Americans themselves would put it, but practically all of the brushes I had with the nurses found me at loggerheads with a Negro.

Now I must insist firmly and sincerely that I have no race prejudices. I have travelled too far and too wide to believe for a moment in grandiose theories of racial character and the like. Men and women, after all, are individuals and, whatever their nationality or colour, must

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be judged as such. Some of my fellow interns, some of the southern States where racial prejudices run high, as all know, were at first a little taken aback at finding that California has no race laws or colour bars of any sort, and that they were expected to work with Negro doctors and Negro nurses. The thought that there was anything unusual in it never occurred to me. Yet, as I say, the fact remains that I seemed to get on even less well with the coloured nursing staff than with the white. I can offer only two alternative, tentative explanations: either I was unfortunate and, as I have just said, it happened that way, or else the Negro, finding himself released from the almost savage restraints put on him (or her) in many States, automatically and unconsciously becomes aggressive as a token of his (or her) new-found freedom. I will leave it at that.

The first incident of this kind worth mentioning happened when I had been an intern for only a few days—three if I remember rightly. The trouble arose so unexpectedly and over so simple a matter that it caught me quite unprepared, new as I was to the whole atmosphere. I had been sent on some errand—that is part of an intern's duties—and I was quite unfamiliar with the geography of the huge building, which towered upwards for fifteen stories, and whose corridors—each long enough to provide a training ground for long-distance walkers—formed a labyrinth. At last I came to what appeared to be a reception desk, at which a coloured nurse was sitting.

I looked about me helplessly.

'I wonder,' I said politely, 'if you could tell me where Room Number Eight is?'

A simple question such as anyone might have asked, and I think I can say truthfully that neither my words nor my manner were discourteous.

To my astonishment she shot me a look of withering contempt.

'Can't you read?' she demanded.

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For a minute I stood speechless, completely dumb-founded by this extraordinary reception. My temper blazed. I was not used—yet—to being spoken to like that, and in any event nurses had no right to speak like that. I flamed out some sharp retort and she thrust back. Then, calming, I went so far as to apologize for my outburst and explained that I was a new intern with a rather urgent errand.

‘Intern? So what? Do you own the earth around here? I thought you were the new ambulance driver.’

It was a mistake she might have made, for interns wore uniforms that were not unlike those of the ambulance drivers. But even if I had been an ambulance driver, I still failed to see that her reception of my question was justified. Nevertheless she seemed to think that the matter was closed, and she broke off the engagement. Ostentatiously she turned away and picked up a book, one of those glossy magazines with the inevitable cupola-breasted sweater girl on the cover.

It was a depressing experience and I resolved that in future I must control myself with the tightest of reins. I was not going to become involved in slanging-matches with nurses. It had been with the greatest difficulty that I had refrained from giving her the dressing-down I would have given to a nurse in my English hospital, in the very unlikely event of her having addressed me in that fashion. But, I reminded myself, I was an intern. I resumed my search for Room Number Eight, which turned out to be just round the next corner, and fulfilled my mission.

The next incident was more serious, and it arose not out of a triviality but out of a professional point, on which, foolishly, I was induced to persist in my own opinion. It happened in this way.

Today, American surgeons are giving more and more care to the pre-operative preparation of their patients, even for the most minor operations, and blood transfusions are given as a routine measure, whether the

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patient's condition seems to indicate a need or not. Certainly the results appear to be extremely satisfactory, for patients recover more quickly and more completely.

It is the intern's duty to give these routine transfusions—and they are precisely that, for the whole procedure is extremely simple. I had been instructed to give such a transfusion to a patient on whom one of my ex-student staff surgeons was to operate. I made my way, as arranged, to the room where the transfusion was to be made, and where I was told the nurse would have everything prepared for my use.

The nurse was a Negress whom I had not seen before. She glanced at me and a vaguely hostile smile crossed her lips.

'Good afternoon, nurse,' I said, automatically.

She made no reply, but as though to hint that I was there to work and not to make myself pleasant, she handed me the syringe. As I took it, I stared in astonishment, for that syringe had on it an enormous needle, the sort of thing that a veterinary surgeon might have used when injecting a horse. I handed the instrument back.

'A smaller needle, please,' I said, again automatically. My interest was concentrated on the patient, a young girl in whose arm that huge needle would have made quite a nasty wound.

'It's the one that's always used,' snapped the nurse, trying to hand me the syringe again.

I was not used to having my orders questioned by nurses.

'A smaller needle, please, nurse,' I said firmly.

She dropped the syringe on the trolley, shrugged in an exaggerated way, and laughed unpleasantly.

'Say, what d'you think you are?' she demanded. 'That's the way we do it right here, and I guess I don't go around taking orders from interns. Of course,' she added savagely, 'if it's just you can't do it, I guess I can manage.'

I had been hot with anger. Suddenly I became as cold as ice.

'Then you had better do it,' I said freezingly.

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I strode out of the room. The shades of a hundred departed outraged surgeons whose opinion had been flouted by juniors walked beside me. Outside the door I paused. That transfusion had to be made, and a nurse was not allowed to give it. I expected her to come running out to apologize. But the door remained shut. My rage boiled up again. I was not going back. If she chose to be in-subordinate she would have to take the consequences. It was preposterous that a nurse should argue like that with a surgeon in front of the patient. . . .

*But I was not a surgeon. I was an intern.*

The thought struck at me like a blow. Of course that was it. As an intern I had no right to question anything, not even the obviously absurd decisions of nurses. I knew nothing. Any nurse knew more than I.

But I was not going back to eat humble-pie. I walked away.

The affair worried me, not in itself, but because I had not carried out required treatment on a patient. I wondered again and again how things had gone and whether the nurse had indeed given the transfusion. I thought it unlikely. No doubt she could have done it, but it was quite contrary to rules for her to do so, as she knew, as she had known when she taunted me. Besides, to have done so would to some extent have covered me up.

As it happened, the storm had attracted attention. No doubt I had spoken more loudly than I had thought, and the staff surgeon had overheard the latter part of the exchanges. He had summed up the situation in a flash, for he knew that I must have been involved, since the girl was his patient and he had given me my instructions. Quietly he had gone into the room, and, without a word, given the transfusion—no doubt using a smaller needle, for he was a good surgeon. The nurse was transferred to some other department. Though I performed, after that, very many transfusions in that very room, I never saw her again; nor did I regret her absence.

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But this was another and more serious warning. I made a new resolve to remember that I was not supposed to know anything—and never, never to try to give orders to nurses. It had been a dangerous moment for me. That was quite clear when I came to consider the matter calmly. By forgetting my very junior status and acting as though I had a right to do things in my own way, I had really failed to carry out instructions I had been given by my superior. Rightly, that would have been regarded as unforgivable—and no American hospital, where efficiency is the watchword, would allow it. Interns who made trouble were fired. They were not so scarce that they had any value.

Let these two incidents suffice. There were others, though none came quite so near to disaster for me as that second example I have just related, where I was saved by the action of a friend, for whose tact and understanding my admiration increased daily. If I were to multiply these affairs here, there would be two dangers, neither of which I am prepared to run. The first is that I might seem to assert too strongly my real status and to imply that, having taken the job of intern, I felt myself superior to it. Nothing could be further from the truth; I have quoted these incidents to show how my quick temper and the acquired habits of years increased my problems—problems in which I was not alone, for there were other interns whose experience was no less than mine. The second is that, having selected these events simply as illustrations, I might be accused of colour prejudice. Again I plead not guilty. My only reason for recording them here is that they were my first experience of the prevailing nurse-intern war, an experience that was to be repeated in various forms not only to me but to others, throughout the whole of my stay at the hospital.

Little by little I settled into the job. One by one the initial difficulties of readjustment grew less, though they never quite disappeared, and there were constantly recurring threatening moments when that dangerous tendency

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to forget I was a dog's body had me in jeopardy. I began to accept the small world bounded by the hospital walls, a world full of the inevitable internal strains and cross-purposes which were, I think, accentuated here as the result of the Californian law that forced so many doctors of experience into a position that some, at least, found irksome and undignified—and, on occasions, humiliating. I think that the fact that this was not the first time I had been forced to turn my back on what I had achieved, abandon the status I had attained, and start again at the foot of the ladder, made it relatively easier for me than for those who were coming to the experience for the first time after a life of normal, ordered advance. It was, I admit, harder for me now than when I had left Italy for Germany, or even than when I had gone from Germany to England, in similar circumstances.

There was, too, the constant reminder I could give myself that this was my own deliberate choosing. What I was doing I was doing of my own free will, perhaps to satisfy some whim, perhaps merely to satisfy my hunger for fresh experience. Certainly I was not sure that when I had finished my year and found myself qualified in California, I would practise permanently there. That steeled me when the outlook seemed black, the present situation intolerable. But I was able to fortify myself by comparing my lot—for I was still free to leave if I chose without detriment to my future—with that of some other experienced men who were obliged to undergo this year of stern initiation. One of my intern colleagues, older than myself, had come to California because the State's superb climate offered the only chance of life to his wife, a chronic invalid. He had had a fine practice as an orthopaedic surgeon in Pennsylvania. For him, I think, this year was a purgatory.

Primarily, then, it was to satisfy myself that I was undergoing this experience, and if it brought hardships to me, I had none to blame but myself. Yet also, it was

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already clear that if, later, I felt inclined to stay on, my time would not have been wasted. Already, outside the hospital, friends and colleagues were trying to convince me of the great chances I should have when I had gained Californian recognition. Some went even further. They told me outright that, if I stayed the course, a department in the hospital would be offered to me. It was no idle promise. They were men of responsibility, occupying important positions in the hospital hierarchy; they knew what they were talking about, and they would only have damaged themselves if they had indulged in loose talk.

I was content to let the future take its course. Meanwhile, once I had learnt to hold my tongue and not to kick against the pricks, I began to enjoy myself in a quiet way. Almost every day brought me some new experience or threw some interesting sidelight on American medicine and surgery. The resources and ingenuities of American doctors seem endless, their thirst for knowledge and novelty quite unquenchable. Sometimes it led them into excesses, of which I shall relate a very striking example later on. Their love of novelty for its own sake—as it seemed to me—was occasionally dangerous. Yet they showed an average standard of professional competence that was astonishing. One could, if one's eyes were kept open, learn something from even the juniors among the surgeons. Of the physicians I will say nothing, except that their skill was no less. It would be presumptuous of me, a surgeon, to attempt to assess their many merits.

Most of all, of course, I enjoyed those occasions when I attended operations. There were superb surgeons on the senior staff, whose work, no matter in what speciality, was always worth watching. Sometimes, of course, I found myself silently criticizing their methods or their conclusions, but I would hardly have been human if I had not. No man who has spent his whole life in one profession will admit that he has not some special, worthwhile knowledge of his own that his experience has taught him.



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But it was an odd feeling to find myself in the operating-room in the humble rank of a third assistant, often with no more to do than hold the instruments. Even that, however, proved a valuable experience. It gave me a new perspective—or perhaps I had rather say that it focused my conscious attention on something that I had come to take for granted.

That something was how much a surgeon owes to his assistants—and not merely to the first assistant who is often more his collaborator in the operation than a mere helper, particularly in some of the more intricate procedures. I realized again what I had long forgotten—or at any rate thrust out of my conscious thoughts: that even the third assistant is a vital member of the team in a major operation. He is something more than a surgical page-boy. On his ability to anticipate the surgeon's next move, especially in an operation that is giving unexpected difficulty, or that is partly exploratory, much depends. A surgeon who finds his every need supplied without having to name it can give every bit of his attention to the actual operation. His mind is at rest, fresh and alert to direct his skill most profitably.

In that operating-room—how often I raised a pitying smile by calling it an operating theatre!—I saw performed, as part of the ordinary routine, many brilliant and outstanding operations. I saw accepted as a matter of course skill that in most other countries in the world would have been regarded as superlative and exceptional. And there at least I was the perfect intern, prepared, as a good intern should be, to absorb every piece of knowledge that might be of use to me.

This is not the first time I have praised American surgery, and no doubt I shall do so again. But—as I have also said before elsewhere—it has its own special weaknesses and inherent dangers, some of which arise out of its very excellence. One of them is its narrow and rigid specialization, for the general surgeon barely survives in

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America, where each man is a specialist who knows everything there is to know about the surgery of one small part of the human anatomy, or of one small group of procedures—such, for example, as plastic surgery (and even within that there is a tendency to specialize).

Here, in the day-to-day work of a very busy hospital, I was able to see more of those weaknesses, as I was privileged also to witness the triumphs. I discovered, in a new way, that this specialization, which often means that one surgeon will spend his whole time performing but one particular type of operation, and that nothing will induce him to step an inch outside the territory he has chosen as his own, means the maintenance of what is, in my view, an unnecessarily large staff. It is not only that, in the absence of the general surgeon, or the man who is equally competent in two allied fields, the number of surgeons themselves must be very large indeed to meet the work of a general hospital; each of these specialists must have at least his own first assistant, who is a specialist-to-be, and who must know his chief's methods intimately, and probably other assistants as well. The system is expensive—but that is of little account in the richest country the world has ever seen. It is also difficult to administer, for it tends to become unwieldy, and the task of fusing all these many specialists into a co-operative team is herculean. The latter presents problems which, I frankly believe, only American efficiency could satisfactorily solve, and only the American temperament, which insists on equality and independence in private life but at work is content to regard men as units in a machine, could face.

Another weakness—at any rate in my view—is the reliance placed on what I have called gadgetry. The American doctor seems unable or at least unwilling to trust his own judgment. He tries all the time to make his work as exact a science as, say, chemistry or physics. There are diagnostic instruments for everything, and even

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the most experienced doctor will not come to a decision until his opinion has been confirmed by instrumental examinations and laboratory tests.

Now this is as it should be—up to a point. Without the wonderful apparatus that physicists and chemists and engineers have developed, modern medicine and surgery would not have made the spectacular advance they have achieved in recent years. Human judgement is fallible; where it can be checked by instrumental means, the gain is enormous.

That is true, but it does not supplant the need for human judgement. The instrumental examination and the laboratory test merely move the need for judgement one step further on, as it were. The X-ray photograph has to be interpreted; the analyst's report has itself to be analysed and inferences drawn from it. No machine can form an opinion. It can only present, and then within its limitations, more data for that intricate apparatus, the human brain, to consider. And, as everyone knows in this age of machines, no man-made apparatus is infallible. The camera can lie. The electrical recorder can distort. If the instrument is regarded as an examiner of errorless precision, the road to unlimited mistakes is opened wide.

There is, too, one other essential point. Each human being is an individual, unique in every way. It is impossible to measure a human being precisely, as a bar of steel can be measured, or even the diameter of microscopical particles determined. The instrument, even if it records precisely, only reveals the state of affairs at the particular instant it was used. But the human life goes on with never two moments precisely the same. Once again, human judgement has to be called in to decide the relationship between what the machine has reported at one instant and the continuing process of flux that is the individual human life concerned.

American doctors have, I feel, a tendency to rely too much on the machine as such and to substitute it too

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much for that peculiar blend of knowledge and intuition which is bred by training and experience—what Americans themselves have so vividly named a 'hunch'. In trying so brilliantly to convert healing into an exact science, they are inclined to forget that the material with which it deals is very far from exact and always must be if it is to remain human. That is why I believe intensely that the element of art, of understanding and a judgement based not on mechanical readings but on subtle human values, must always be fundamental to medicine and surgery.

There was one case that brought home this belief very strikingly to me, and since it occurred towards the end of August, my first month as an intern, it will make a fitting end to this chapter—and prepare the way for the next. The principal actor in it was one of the surgeons at the hospital, whom I have no hesitation in placing among the very finest in the world today. I had watched him operate several times, and each time I found myself lost in admiration of his surpassing skill, his astonishing accuracy, and his daring that never once endangered the patient. If I tell the story of this case here, it is not to detract from his reputation, it is simply to demonstrate that even the greatest and most brilliant of men can be deluded by fallacies that are themselves the outcome of his ceaseless striving for perfection.

This surgeon would not even make a preliminary examination of a patient until that patient had been subjected to the most elaborate and exhaustive of instrumental and laboratory tests. Only thus, he would explain, could one be one hundred per cent sure of what was wrong and what had to be done. There was no room, he said, for 'opinions' in diagnosis, what was needed was facts—and only the apparatus of the laboratory could supply those. So, when the time came for the patient to interview the surgeon, there was always on the latter's desk a thick file containing X-ray photographs, diagrams, analysts' reports, and so on, from which he proceeded to build up a complete

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picture of the functioning of the human being before him. Within the covers of that file the patient had, as it were, been taken to pieces; the surgeon's job was to adjust, reassemble, and rearrange the parts so that the machine worked properly again.

On paper it looks proper and scientific enough. Diagnosis could hardly be made more perfect or complete. Yet—the doubt remains—can such basically inhuman methods always succeed with the human, living being?

A girl had been brought to the hospital suffering from a slightly enlarged thyroid (goitre) and malignancy was suspected—and unhappily confirmed, a very rare condition in a child, by the way, though there is often some enlargement of the thyroid gland at puberty that disappears in time. The case was placed in the hands of the surgeon I have just mentioned, for it lay within his speciality. He ordered tests. Now there is a new test which, it is claimed, reveals in cases of cancer of the thyroid the exact extent of the malignancy. Most people have heard of isotopes today—they are atoms of elements which though alike in chemical properties have differing atomic weights: and some of them are radio-active. If, then, radioactive isotopes of iodine are injected into a patient with a malignant thyroid, they are attracted to the diseased tissue, and by detecting the range and distribution of the radiation that comes from them, a chart can be drawn showing precisely how the gland and its adjacent structures have been affected. So the theory runs.

This test was carried out on the girl, and revealed a terrible condition. The malignancy had spread far and wide, if the radiation spoke the truth. The surgeon studied his charts and his reports—and he came to a terrible decision. It was necessary, in his view, not only to remove the thyroid in its entirety, but also to remove all the glands of the neck, to make sure that no focus of further trouble would be left inside the body of the patient.

It so happened that I was instructed to act as third

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assistant to the surgeon on this complicated operation. I shuddered when I learnt the details of the case and what was proposed. This was a mutilating operation, which would leave that girl—if she survived—a monster for life. No surgeon can regard such an operation with anything but horror. To a plastic surgeon, the thought of a mutilating operation for which no satisfactory restoration can subsequently be made is little short of barbarism. Yet the facts could not be disputed. It had to be done. This surgeon was certainly the last man in the world to take so drastic a step unless he was completely convinced that no other course was open.

So, after proper preparation of the patient, itself an elaborate business, the operation began. In my capacity as third assistant I had little to do, and what there was I could perform almost automatically, so I was able to give practically my whole attention to what was happening on the table. I shuddered again when I realized the enormous amount the surgeon proposed to remove; it was greater than I had expected. But though the sight depressed me, I was still fascinated by the man's supreme skill and confidence. He might have been commencing the most simple of routine operations. This was sheer perfection. I felt that, however drastic the operation, at least the child was safe in those magnificently competent hands.

When the malignant tissue was reached, a small piece was detached and immediately sent to the pathological laboratory for a quick test. This is quite a normal check procedure, though in this case it seemed superfluous. The chart had shown convincingly all there was to know about the malignancy.

In ten minutes or less the report came back from the laboratory. The test piece showed no signs whatever of malignancy. My heart leapt for joy. This poor girl would be saved from this terrible mutilation. Truth, for once, had proved less terrible than expectations.

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But the surgeon went on calmly as though nothing had happened. In fascinated horror I watched as step by step he removed almost every internal structure from the girl's neck. His oracles—the isotopes—had spoken. He was certain that what he was doing was not merely right but also the only treatment. Of course, there was a doubt about the pathological test on the tissue. There was the remote chance that the one unaffected piece in the whole area had been selected. . . .

In a half-daze, with an intuition of tragedy, I did what was required of me. At last the horrible ordeal was over. The last stitch was tied, and the patient, a wreck for as long as she might live, was taken away. Technically, it had been a masterpiece of an operation. But something more than superhuman skill was involved. I left the operating-room tormented by doubt. Had it been really necessary? Had it?

It was a doubt I did not expect to have resolved. Nevertheless the fearful answer came. In the hospital, one of the senior surgeons was preparing a treatise on malignant tissues, and instructions had been given that all such tissues obtained from operations were to be preserved and sent to the laboratories for examination instead of destroyed in the normal way. But for that chance the truth would never have emerged.

I think there was no-one in the hospital who did not feel a sense of tragedy when the report was made known. It was a terrible revelation. In all that great mass of tissue which had been so skilfully excised, not a single trace of malignancy was found. It was enlarged definitely, but the enlargement was no more than an exaggeration of a more or less frequent and normal process that takes place at puberty, as I have already explained, and it could probably have been cured by purely medical methods.

The needless tragedy of it all haunted my thoughts for days. The case seemed to me one that established beyond all doubt the utter necessity of not placing entire reliance

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upon tricky and not entirely established instrumental tests. The isotopes test was worth making; it should have been made, as the facilities existed, but it should never have been accepted as conclusive evidence on its own. In such a case one must be prepared for the worst while hoping for something less. The one conclusive test was the pathological one—and that was negative. That, combined with the general appearance of the tissue, which did not suggest malignancy to me, should have been sufficient to call a halt to excision until further explorations had been made.

Yet the surgeon had not failed in the slightest degree in his duty. His failing had been not that he had jumped to rash conclusions, not that he had embarked thoughtlessly on a drastic operation, but that he had, against the spirit of surgery as I define it, exalted the inhuman, physical test above his own judgement. In a way he had taken too much care (if such be possible) in arriving at his diagnosis and had befogged his brilliant mind with data that were too many and too uncertain.

It was on this sombre note that my first month as an intern closed. The case left me with a depression I could not throw off. I could, as August merged into September, see only the blacker side of hospital life. There were still eleven months to go. Whether I could endure so long was a question that only time could answer, and before that answer came much more was to happen. I was to see almost at once another and unsuspected side of American surgery, but the story of that comes into my record for September.



## September

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The immigrant or visiting doctor in the United States finds himself in what appears to be a medical Utopia. If he has come from England he has almost certainly seen films showing enormous, immaculate hospitals equipped with all manner of apparatus, known and unknown to him; sometimes he may have wondered, when reading the latest American textbook, whether the exquisite techniques described really are in daily use and not simply descriptions of what might come to pass in an ideal world of the future. After quite a short time, however, these doubts leave him. The truth is no less, and sometimes a little more, than he has been led to believe.

American hospitals in the bigger cities are indeed huge, perfectly planned, and equipped in a way that is a tribute both to the scientific ingenuity and to the wealth of the United States. In contrast to the versions on the films, their doctors are not on the average so handsome and athletic, nor are their nurses quite so pretty and seductive (but perhaps I am prejudiced against American nurses in the flesh, for reasons I have already set out). With that difference, which is only to be expected, the scenes shown in the innumerable American medical films that have crossed the Atlantic are quite typical of American hospitals at their best. In their day-to-day work American physicians and surgeons do, in fact, make use of methods that, in most other parts of the world, are certainly not

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in normal use and might even in some cases be regarded as needlessly refined and complicated. Of the daring triumphs of American surgery I have already had something to say in this book and shall have more to say later. In medicine there is a comparable state of affairs, for physicians are constantly being provided with new drugs and new treatments by the innumerable teams of research workers engaged in the hospitals themselves, the universities, and America's vast chemical industry. The American doctor's chief problem is, in fact, to keep abreast of all the developments going on around him.

Dazzled by all he has seen and heard, the European doctor is apt to return home in a curious mood compounded of hope and despair. On the one hand, his enthusiasm has been excited by the vision of high achievement; on the other, he is cast down by a realization of his own comparative backwardness and inefficiency, as they seem. So at least it was with me after my first trip to the United States, and I do not think my experience was unusual. It is only later that one comes to recognize that equipment, laboratories, new drugs, and the rest are not the whole of the story, and that an over-great reliance on them can sometimes be as mistaken as the cramped inadequacies of many British hospitals must appear outrageous to a visiting American doctor. Of that I have already given one example in the previous chapter.

This, of course, was by no means my first experience of American medicine and surgery, and so it was unlikely that I should be dazzled again. I had, in fact, on earlier visits come to the conclusion that there must be another aspect of American practice. It was utterly beyond human credulity that every American doctor, no matter where he might work, was a superman informed, as if by magic, of all the latest advances in research—and furthermore, if he was a surgeon, endowed with the skill necessary to make use of them. Nor could I believe entirely that every hospital in America attained, even on a reduced scale, the

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standard of the great institutions of the flourishing cities of the Eastern States or the south-west coast. America is innately progressive, eager for improvement, scornful of inefficiency: but also America is a vast country and there are towns in it that are little more than primitive. In such places the American doctor was, no doubt, neither better nor worse than his English counterpart.

Yet I still had a distinction in mind, even though it was implicit rather than consciously made. I accepted that in American hospitals generally one did find the sort of magnificent efficiency that existed in that in which I was now still surprised to find myself an intern. Against it I set medical practice in the remote, isolated districts. There, I felt, and there alone, would I find a lower standard. But even there I believed that the deficiencies would be recognized and that, within the limits they imposed, doctors would strive continuously to emulate what was going on in the big cities.

But America is a land of unending surprises. One should, to live happily in the United States, suspend one's powers of disbelief. The man who has trained himself to be astonished at nothing is the one least likely to crumple up under the continuous stress of American life. When, as a visitor or immigrant, one has reached the state of having no longer to assure oneself that what is happening before one's eyes is not a fantasy or a nightmare, then one may be said to have become acclimatized. It is a rare and happy state, and like all such ideals is probably never attained completely by any one person, so inexhaustible are the powers of American life to shock, startle, and astound with the incredible.

Certainly I had never even contemplated the possibility that my assessment of American medical affairs would be shattered in one of the finest and best equipped hospitals not merely in California but in the whole of the United States—that in which I was working. As I attended more and more operations as an assistant of the lowest grade,

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or occasionally, by favour, as a spectator, I was quite prepared to be confronted with some new demonstration of advanced surgery of a kind that would have been considered impossible even a few years ago. I was ready to see cases that, anywhere else, would have been regarded as outside hopes treated here as normal routine with a high chance of recovery. I schooled myself to be content, at times, with envy. Perhaps, after all, I had deluded myself: my mental eye was still susceptible to a little dazzle, and my lowly status in the hospital unconsciously created a tendency for me to accept, with the other interns, the illusion that the men who did these things were as gods.

I was to be rudely disillusioned—which was undoubtedly good for me; there is none who does not ultimately benefit from the crushing of a false belief, particularly one that leads inevitably to belittling one's own talents, however humble they may be. The curious thing is, however, that I did not recognize the first stage of my disillusion for what it was. In fact, it served temporarily to increase my sense of awe and wonder and even to make me think that the American surgeon could dispense with all his scientific and laboratory aids, ignore most of the basic rules of surgery—and still attain, by daring and skill, results that any European surgeon would unhesitatingly describe as impossible. This is how it came about.

Among those operating at the hospital was a certain surgeon who was known to everyone, even to the interns, as Tom. He was just the sort of man who, in any country, would have been on first-name terms with everyone, and in America, where the practice goes to lengths that would be impossible elsewhere, it was inevitable. It was not that he was in any way benign; there was no particular suggestion in the use of his christian name of that love and respect which sometimes make it a mark of reverential affection. On the contrary, he was expansive, bonhomous,

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and intimately friendly to everyone at a first meeting, with a shattering slap-on-the-back style that was apt to be alarming to one more accustomed to restraint among eminent surgeons.

No doubt this personality—in the sense of the popular manuals on How to Win Success and of the correspondence courses on psychology—had more than a little to do with the fact that he was reputed to be one of the most successful surgeons in the city, with an income running into hundreds of thousands of dollars a year. There was no reason to doubt that figure at all, for in the United States there is no privacy about these things. Moreover, there was a special reason why it was believed that Tom's earnings were spectacular—which brings in another feature of American life that seems odd to the newcomer, especially one from Great Britain.

As the Kefauver investigations into crime showed (they were very widely reported in England, and in America had a television audience of millions), crime is almost an accepted industry, profession, or calling in the United States. The successful gangster or racketeer, while still at liberty, may not, it is true, be *persona grata* everywhere, but at any rate he is not forced entirely underground as he is in most other (or should I say European?) countries. In the American way, he has the money and he can buy all he wants. In especial, he has his lawyers, whose skill in keeping the law at bay is little short of miraculous, and whose remuneration is correspondingly lavish, and he also has his doctors and surgeons—men who are not inquisitive about the antecedents of injuries that look like weapon-wounds—and these command fees only less munificent than those of the lawyers. A racketeer's life is a very vulnerable thing, and its owner is particularly concerned with its preservation, as I was to learn.

Tom, then, was one of those surgeons. No-one thought any the worse of him on that account. It was 'just part of the set-up; things happened that way'. He had, it

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appeared, had the privilege of saving a good many of these distinguished (or notorious) lives from imminent danger. Nor did Tom make any secret of it; he had no reason to do so. And no matter what old-fashioned prejudices one might have brought from the eastern shores of the Atlantic, one could not help liking this breezy, energetic, ebullient surgeon, who was in late middle age.

The first case in which I saw him go into action, so to speak, concerned one of these special patients of his. The man was alleged to be one of the toughest in the business, and the frank, uninhibited press of America did not hesitate to brand him outright, though so far the accusations had never been tested in court. He had come into hospital to be operated upon for some quite minor trouble—it does not matter what—and I had been delegated to give him the routine blood transfusion that, as I have said, is now invariably made in all surgical cases, minor or major. Tom was with him when I went into the ward.

Tom was his usual jovial self, making wisecracks in almost every sentence he spoke. But Mario, the man in the bed, was as white as the sheet that he had pulled up under his chin so that only a lean, startled face peered out apprehensively. For Mario was not so much afraid as terrified. When he spoke—which was only occasionally—his voice quavered. There was something strange and contemptible about that abject terror in an adult man—especially one reputed to be tough and implicated in several killings if not the actual perpetrator; and also something familiar. It was the latter aspect that puzzled me. I have, as every surgeon has, ample experience of patients who fear the operation from the moment its desirability is carefully mentioned. But this fear was different. Then I recalled why it was familiar. I had seen something like it once—and only once—before. That had been during the war, and a small girl, not more than seven years old, had been brought into the hospital during a raid. With her parents, both of whom had died, she had been

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trapped in a blazing house and seen things which no-one, least of all a child, should be allowed to witness in a world that professes to be civilized. Her terror was almost paralysing to behold—for it was the fear of the weak tested beyond endurance. To her I had felt an overwhelming compassion and protectiveness—but for this creature in the bed I had nothing but contempt. The sight of him was nauseating.

Tom's voice broke in on my thoughts. He was rallying his frightened patient.

'You're so tough, Mario,' he said, 'we don't have to worry over an anaesthetic for you.'

Mario closed his eyes and shuddered.

Tom laughed. 'You don't have to take it that way,' he said, more seriously. 'In twenty-four hours you'll be O.K. We'll fix you.'

A sudden change came over the man. He shot Tom a threatening glance.

'It had better be that way,' he said. His voice grated. One could—if one remembered one's gangster pictures—visualize the threatening, suggestive movement of a gun in his hand—though his hands were out of sight below the sheets.

I did what I had to do and went about my other duties, which, as it happened, gave me time to reflect on what I had seen and heard at this remarkable meeting. I had learnt more about gangsters than about Tom, who, it was true, had chatted with me before dismissing me. Mario's behaviour gave the key to the whole problem of the gangster—and in putting it forward I make no claim to originality. The gangster is a man—if he can be called that, and Mario hardly deserved the title—who is in a state of arrested adolescence. That look of terror indicated a mind not sufficiently mature either to face facts or to listen to reason, a child's mind. That sudden change from cringing fear to hectoring and veiled threat was equally childish. In short the gangster is a creature with an

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immature, unformed mind, with all its uncontrolled impulses on the surface—and the physical equipment of an adult to gratify them. Those few words paint the picture of a menace.

I decided, too, that being doctor to such creatures was a not altogether unhazardous occupation. Mario's threat had been real. Bullying and cringing were probably the only two types of conduct he knew. A successful surgeon might, as Tom apparently did, make a large income. But it seemed that there were risks to offset against that fact. Failure could easily involve higher penalties than those demanded of a practitioner with more orthodox patients.

Rather to my surprise I was assigned, two or three days later, to act as Tom's assistant at an operation. Whether my short talk with him had impressed him or it was merely one of those gestures of good-fellowship he liked to extend to all newcomers, I do not know. Nevertheless, I found myself looking forward to the experience. Further thoughts had led me to the conviction that Tom must be something special in the way of surgeons. I was not especially impressed, in this respect, by his financial standing. In surgery, as in other things, the attainment of a huge income is not necessarily an indication of superlative ability. No, it was his peculiar type of practice that proved it—as I thought. Mario's threat had not been idle in any sense. If he had uttered it seriously, then no doubt other men of his type had also done so to Tom in the past—a considerable number of them, in fact. Therefore, I argued, Tom's long survival as principal consulting surgeon to the gangster-racketeer class was a certain indication that he had lost very few patients and knew all about ensuring quick, pain-free recoveries; for it was clear that these people did not regard pain as an illusion. From such a surgeon, I imagined, much was to be learnt.

For once I was right. Tom gave me some valuable lessons. But they were hardly what I had expected.

That first operation was for resection of the stomach—

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cutting away a part of the organ, probably because gastric ulcers have perforated the wall. It is not so drastic as it sounds, for man can exist quite happily with half or less of his stomach missing, or even no stomach at all, and many are going about in that condition, barely remembering the fact, except when they find they have to take food more often than a normal individual. In a strictly professional sense, nothing could have pleased me better. This was right in my country. In my time I have performed very many operations of this kind, and so I felt that I should be able to judge precisely Tom's standing as a surgeon. Though I pride myself on being as good an abdominal surgeon as most, I might nevertheless learn something. I did. *Ex America semper aliquid novum*, to adapt the old tag; out of America always something new—and, I might add, unforeseeable.

From the moment that operation started, my eyes almost jumped from my head with astonishment. Tom worked like a man possessed. Here was none of that scientific deliberation which is so characteristic of the American surgeon. Tom worked as though everything depended on his completing the operation in the shortest space of time—which may in certain cases be necessary, but never, in my experience, in cases of this kind. He was, I think, the fastest worker I have ever seen. When I was a student, anaesthesia had not become the exact science it is today, nor were post-operative treatments so effective; blood transfusion, for example, had barely been heard of as a regular procedure. In such circumstances, speed of operation was not without merit, and a fast-working surgeon gained a great deal of admiration. To-day, however, the need for cutting down time on the table is not nearly so great, and it is recognized that haste can cause a lot of unnecessary and highly undesirable shock to the patient; so the deliberate surgeon tends to be also the good surgeon. That had been my belief, shared, as I imagined, by all others.

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In my own work I have always estimated that a stomach resection of this kind takes about a couple of hours, if it is to be done properly. Every blood vessel, no matter how small, has to be taken up and sealed off before it is cut. Great care is demanded in the actual resection. When that has been carried out, the organ has to be closed by an elaborate suture in three layers, so that the risk of leakage of the stomach contents, which, if it occurs, almost inevitably leads to peritonitis, is eliminated as completely as can be ensured by human skill.

Until that moment when I watched Tom operating, I had thought that those were fundamental principles of procedure universally accepted by all abdominal surgeons. Yet this astonishing man seemed never to have heard of them. He opened the abdomen rapidly and widely and reached the stomach, taking no special care to tie off the blood vessels as he reached them; the smaller ones were simply ignored. Then, with a speed that not only amazed but also startled me, he proceeded to cut away at least half of the stomach, when, in my judgement, considerably less would have sufficed. It was fortunate that I held little more than a watching brief, for by this time I was so flabbergasted that I was practically incapable of movement.

More shocks were to follow. The wound in the stomach was simply sewn up. One layer of stitches alone was put in. Then, at the same breakneck speed, the incision in the abdomen was closed. In only half an hour the whole thing was over, and Tom was going off to wash as calmly as though he had performed an absolutely conventional operation—as, indeed, he had by his own lights.

If, at the moment when my tension relaxed, the ugly and uncomplimentary word 'butchery' crossed my mind, it was in a sense unjust. There could be no doubting that the man possessed a most extraordinary dexterity. Any surgeon might have envied his high-speed skill. Crude in planning the operation might have been, according to the

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accepted standards; but there was nothing crude about the way in which he had performed it. If one accepted that the procedure he had adopted was sound, then this was one of the finest pieces of surgery I had ever seen.

But I could not grant that condition. Everything of the surgeon in me cried out against it. This was a moment when I had to call upon my last ounce of self-control. I wanted to run after him protesting, arguing, telling him that the patient must surely die, even perhaps asking him whether this was surgery. . . . In time, and with an effort, I remembered I was only an intern with no right to criticize or even comment, a dog's body. I held my peace.

It was as well that I did, for the upshot was even more remarkable than the operation itself. I followed the progress of that patient as though the operation had been my own—and the most difficult of my career at that. Hourly, I expected to hear that the man had collapsed and died, or at least that peritonitis had supervened. The news that reached me was exactly the opposite. There were no complications. More astonishing still, the patient recovered more rapidly than I had ever known one of my own to do in similar circumstances.

To me, the case was inexplicable. It could not be dismissed by the facile thought that perhaps not all Tom's patients were as lily-livered as Mario, and that some of them were really tough. As I saw it, no human being could stand up to such treatment. Bright thoughts like that were out of place as explanations of what loomed over me as a serious problem. For I began to ask myself whether it was I, not Tom, who was wrong. The peculiar reverence I shared with most European surgeons for American surgery caused me to ask myself some questions that, a few days before, would have seemed ridiculous to me.

By all the rules that patient should have died—but he had not. His recovery had been rapid and complete.

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Could it be, then, that the careful, conservative methods that signified 'good abdominal surgery' to me were only for the merely competent, by whom not the slightest risk should be taken, and in whose operating precaution had to be carried to unnecessary extremes? It was a humiliating thought, yet I could not dismiss it.

The more I thought about it, the more my doubts grew. Tom was acknowledged as a leading surgeon in a hospital in which, hitherto, I had accepted that the surgery was among the finest in the world; I had heard nothing against him, except it might be an ambiguous remark made by a senior intern, whose time was nearly over, and who had said to me when he had heard I was to assist Tom: 'You'll sure be seeing something.' I could not believe that incompetence or even unduly risky surgery would be permitted in such a place.

I found myself wondering whether the methods Tom had used were those of the real master, whose skilful speed made all those refinements I had regarded as essential pointless. It had happened before in surgical history that elaboration and over-prudence had given way to simpler, more direct methods which earlier surgeons would have considered foolhardy. It might be happening again, and Tom himself might be the pioneer of a return to simplicity and re-establishing sheer speed as one of the essentials of abdominal surgery. Nevertheless the doubt lingered. I could not cast aside, on the evidence of a single operation, principles that had been endorsed by the overwhelming majority of surgeons not only in Europe but also, so far as I knew, in the United States. This might be one of those cases in which a man of supreme genius could do things that no-one else dare attempt. Yet it was difficult to see the back-slapping, good-mixer Tom as a genius of surgery. As a salesman he might be; as a surgical pioneer he hardly filled the bill.

Doubts lingered, but my high respect for American surgery remained undiminished and prevented my allow-

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ing myself to come to any clear-cut decision. Perhaps, too, I had acquired something of the proper attitude of the intern and felt that to attempt to put my own opinions against those of a senior surgeon was not far from gross insubordination.

A little later, I was again detailed to act as Tom's assistant—and, of course, I was delighted at the prospect of watching him again. By now my doubts had practically disappeared and when I was getting ready for the operation I was prepared to see a miracle happen again. But a little scepticism still remained—sufficient for me to recognize that this must be a test case. If Tom went about the operation in a way similar to that he had used on the previous case, and succeeded, then I would know all my doubts were utterly wrong, and that I would have to revise all my ideas of abdominal surgery. As a human life was involved, I could not allow myself the human vanity of hoping that Tom might fail. But I did feel that if, in this case, he modified his methods and proceeded with greater caution along more conventional lines, my own *amour propre* would be mollified.

This feeling arose out of the nature of the case itself, which was much more serious than the previous one had been. Here, there was an ulcer which had penetrated into the pancreas, that important gland which is concerned with the digestion of food-stuff and the manufacture of new active bodies. The pancreas can be removed in its entirety, as it has to be in some conditions, and this drastic operation is, under modern conditions, often successful. But in no circumstances must injury be done to it, for invariably the outcome is fatal. Thus, if an ulcer has, as in this case of Tom's, penetrated into the pancreas it must be gently removed without causing damage to the structures into which it is projecting. If one drafted out a hierarchy of necessities for such an operation as this, the first would be care and caution, as would be the second and the third.

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I watched with bated breath and concentrated attention. The operation began precisely as the other had done, with a wide abdominal incision carried out with astonishing speed. But there was nothing wrong in that; what followed would provide the crux. Once again he worked like a man in a fury, throwing aside all the canons of accepted procedure as though they had never existed.

Curiously, though I had an odd feeling that this was a war between him and me in which one or other of us must be vindicated, I experienced none of the horrified shock I had on the previous occasion. A miracle had happened then; it might happen again. Surely, those wonderfully dexterous hands, whose skill could be the product of nothing but a vast experience, could work only for a brain that was no less brilliant. I, who had come to watch him with my judgement suspended and with hostile doubts, found myself defending this man and expecting miracles of him.

I have used that word 'miracles' again because it is the only one. For nothing but a miracle—'an event', as the dictionary says, 'which seems contrary to the laws of nature'—could possibly save that patient. The sudden careful exploration and delicate dissection that I had taken for granted he would show when he approached the ulcer did not reveal itself.

It was, in every sense, a repeat performance of all I had seen before. He might never have known of the dangerous complication arising from that penetration into the pancreas. He resected the stomach rapidly and extensively and then proceeded to suture it, just as he had before. Even then, I did not believe the truth. Some false glamour blinded me, created, I believe, by the sheer manual artistry of the man. If my doubts refused to be completely suppressed any longer, I still half-believed the miracle had happened. On the face of it he had rushed along, taking no special care to avoid the danger area. Yet it might be that his skill was so great, his experience so wide, that he

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was able to know precisely where he was cutting and what he was cutting, in a way impossible to a lesser man.

In medicine and surgery, apparent miracles are always happening. But they arise from the spirit of man as existing in the patient. In innumerable cases, the 'impossible' recovery occurs because—it is the only way to put it—the patient refuses to succumb; and the real doctor takes no real credit for it. But, for the surgeon, these are miracles performed in the post-operative stage. There is, for him, no miraculous superhuman power to direct his hands and his eyes and his brain while he is operating at the table. Then the only things on which he can rely are the combination of his hands and brain working in unison to interpret to the full all that his studies and experience have taught him. He dare not, must not, even cast a look at the goddess of Chance. Methods of surgery change; its principles change; but that is an eternal law.

That day it was not broken. There was no miracle—unless it be the minor one that one man's skilful hands led me, for a moment, to deny the sum of what I had learnt laboriously in a lifetime. For me, it was a tragic lesson.

The patient died. He did not recover consciousness, which was as well.

That same evening I saw Tom with some of his cronies. He was as cheerful, as dominantly boisterous as ever. To be fair, I do not think it was callousness on his part, for callousness in my view is a positive attitude; those who show it are aware of suffering and tragedy but ignore it deliberately. Tom was one of those extroverted personalities so egocentric that they cannot begin to enter into another's problems, pains, or disasters. He held no inquests on his work. A fatal case was a fatal case, and no more was to be said about it. Perhaps, too, he realized, without consciously formulating the thought, that many of the people whom he treated were of small value as human lives, in many cases enemies of society, and he had

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come to share their view that an uncooperative life could easily be forfeited.

I cannot know whether that is right or wrong, but I do know that I should not sit in judgement on another man. What I do know is that it was a grim lesson for me, and that I derived no comfort from the thought that it was my ideas, not his, that had been vindicated. The cost had been too high for any satisfaction on my part.

Without seeming to pry, I tried to find out all I could about Tom and his standing. I found that to some extent my guesses had been right. He did trust to that superb skill of his—the skill of hand rather than of brain—to get him round corners that most other surgeons would have approached cautiously. He was self-confidence personified—as anyone could see. That and his own powers of persuasion enabled him to extricate himself from situations that would have caused most doctors deep anxiety and even actual trouble. So far he had been lucky—but Luck is too fragile a line to hold the anchor of a surgeon's reputation.

It was, I repeat, a grim lesson for me. It was, perhaps, a lesson that I had to learn, and its dramatic nature drove it home all the harder. Yet I wished, and still wish, that it had not had to be gained at the cost of a human life. I do not know anything of the patient who died—whether he was rich or poor, exalted or humble, one of Tom's special patients or an ordinary, honest, hard-working American citizen. But whoever he was his life was sacred. No-one had the right to take unjustifiable risks with it. Perhaps he would have died no matter who had operated. That is not the point. What I do say is that, in such a case as his, the surgeon has an inescapable duty of neglecting no precaution that may, however remotely, seem to offer some aid to recovery.

To return again to the lesson that I learnt, its chief value was to put American surgery into proper perspective for me. I had seen the dark side of the moon that I had

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suspected before. Not every American surgeon was an infallible genius. American surgery, like that of all countries, held within it the good and the bad and the indifferent. They were to be found everywhere, and there was no stratification so that all the good was in the hospitals and all the less good banished to the remoter parts.

In a very short time I was to see again surgery breathing in its mastery, its daring, and its results. Some of it, indeed, was to transcend anything I had seen before—and that in my own chosen field. But I no longer looked upon it as the product of some impersonal, almost deified thing I called ‘American surgery’. When I marvelled it was at the fact that America could attract and support so many of the world’s finest surgeons—a very different matter. I threw away the legend I had created for myself that America had some secret by which she could produce, at will, an unlimited number of super-surgeons. In time, in fact, I found myself asking whether it was not possible that, in a country where competition is everything, there was a risk that the very good might be balanced by the very bad, and the man of ordinary competence be forced to the wall. For where there is much brilliance, there are always those who are ready and unscrupulous enough to take personal advantage of it and exploit it for their own ends, while the ordinarily skilful and honest are incapable of rising to the top and are temperamentally unable to join the ranks of the opportunists.

That is as it may be, and no-one would be more glad than I to find the idea wrong. What is of more importance is that that harrowing experience of the patient who died was decisive for me.

Above all, it restored my faith in myself, which continuing experience as an intern and my now happily lost blind faith in the supremacy of American surgery had begun to erode away. At bitter cost, I had seen my own judgement confirmed. I had learnt, too—and it was

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important to have this lesson, which I have been having all my life, reaffirmed—that no matter how or where a surgeon operates, there are some principles that transcend all else and must never be ignored or forgotten. No matter whether he is operating in America or England, China or Brazil, in a fine hospital in a great city or in a hastily contrived theatre in the backblocks of Australia, he has a life in his keeping, and if through overconfidence or carelessness or indifference to the consequences, he omits one single precaution and the patient dies, then he is morally responsible.

I did not know then that this renaissance of faith in myself had come so opportunely, and that I would so soon need all the confidence and skill I could command. October was to bring a startling change in my status and to witness developments that seemed destined to alter the whole course of my future.

October.

Month of destiny though it was to prove, October began quietly enough. I had settled down at last, and was no longer troubled to any great extent by the thought that I was wasting my time—though I admit that I did still have passing moments of doubt. I had managed to come to terms with my situation, and the contrast between my experience and my status as an intern had ceased to cause an internal tension likely to express itself in upheavals, disagreements, and—occasionally—outright anger. For this pleasant development the tactful and understanding attitude of the staff contributed in no small measure, and for that I must once more acknowledge the debt I owe to those who, in some way known only to themselves, contrived never to insult either my intelligence or my knowledge and yet at the same time did nothing that would have the disastrous effect of singling me out as the object of special favour and so put a barrier between the other interns and myself. I flattered myself that I had carved out a small niche for myself, as proof of which I had acquired a nickname—‘the oldest young intern’—of which I was a little proud.

It was, as I have stressed before, an enormous hospital, built and organized on a scale that is almost inconceivable in England or, for that matter, in any European country. In the couple of months I had been an intern I had had, of course, no possible chance of working in all the many

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specialist departments into which the hospital was divided, nor did I expect to serve in every one even if I stayed the whole year. Nevertheless I had—no doubt like every other intern there—my own secret ambitions. Above all, I naturally wanted to spend some time in the Department of Plastic Surgery. That wish was not very likely to be realized. So highly specialized a department had little need for interns.

This desire of mine arose naturally enough out of the fact that I had been a plastic surgeon before I became an intern (a very curious metamorphosis!) and I was eager to study conditions in California not only as compared with those in England but also in relation to those of which I had had experience in the Eastern States. Here, I knew, nothing had been left unprovided, and the department was magnificently equipped in the true American manner at its best. That alone would have been an irresistible attraction.

But there was something stronger and far more important than equipment and organization. At the head of this department was a plastic surgeon whose pre-eminence was acknowledged the world over. He had come from Europe, where he had made a reputation for himself at a surprisingly early age in a speciality that demands so much experience. He repeated his success in America, where he quickly became recognized as the outstanding master of his art. Here, as he is the central figure of this chapter and I shall have much to say of him, I shall call him Dr. James Condor.

Condor was not only a great plastic surgeon, as I shall hope to show and as everyone who knows his real name would recognize at once; he was also—and it is perhaps even more important—a very great doctor. Famous, honoured the world over, a man at whose feet any plastic surgeon in the world (and I mean that) would have been glad to sit, he never forgot that his profession was more important than himself and that the people who came to him for treatment were the most important of all. Among

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his patients were very many of the most celebrated stars of the stage and the screen. On the material side, he had a practice that brought him in an income fabulously large even for America. Yet to the poor and humble patients who came to him through the normal hospital channels he gave everything his skill and knowledge could provide for each individual case. In one sense it is true of medicine that people are more important than cases—which is why purely scientific medicine is an impossibility. In another it is no less true that cases are more important than people—the sense that the doctor's concern is the individual before him without regard for his social or financial status. Condor interpreted that high principle more fully perhaps than any doctor I have ever known. The affection he received from the simple, common people whom he served through the hospital was a superb and deserved tribute not simply to his skill and the attention he gave them, but, even more, to his fine and lovable character. To say that he was loved is neither an overstatement nor a simplification, for in him was typified all that is best in man. Somewhere at the back of my mind is a phrase the origin of which I cannot trace, but it returns to me now as the aptest words I can write: 'He was a spark struck from the anvil of God.' Of no man could that be more truly said than Condor.

There was nothing I would not have given, no probationary task I would not have performed, to enable me to see him operate or, still more, talk with him and learn from him. I made no secret of my wishes, which, in fact, were not beyond hope of realization. But I made no overt request. What I knew of the man himself suggested that if I had pressed he would gladly have seen me—but, in my own more humble way, I knew how much inconvenience—to put it no higher—it would mean to a very busy surgeon. I confined myself to hoping that the ten months I had still to spend in the hospital might bring the opportunity. But I never dreamt that that hope would

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be fulfilled so soon; and I could never in the wildest delirium of high fever have imagined in what circumstances it would come about.

When, one day early in October, I was called over the elaborate intercommunication system that served every room, ward, and corridor in the hospital, and told to go to the Administrator's office, I was neither alarmed nor excited; such summonses were in no way out of the normal. But when, on entering the office, I saw that the Administrator was not alone and that his companion was Dr. Condor, I started with surprise.

'Come in,' said the Administrator. He turned to Condor. 'I'd like to have you meet Dr. Sava, Condor,' he added.

'It's a great honour to meet you, Dr. Condor,' I murmured as he shook my hand warmly.

'I'm glad to know you,' he smiled. 'I'm always glad to meet colleagues in my own speciality—especially one who's written such a good book on it as you have.'

It might have been a calculated statement, the sort of compliment that any good public-relations officer would brief his principal to make in such circumstances. But—perhaps because I wanted to—I believed Condor had read my book. He was not the kind of man to countenance insincerity in the cause of superfluous politeness; after all, I was only an intern. Besides, it was not at all an unlikely statement. I doubted then, and subsequent experience was to confirm my doubt, whether anything was ever written anywhere on plastic surgery without its coming to Condor's notice sooner or later; and he had a prodigious memory.

I studied him carefully, trying not to appear rude. He was tall, spare and rather imposing in appearance, but there was nothing forbidding about him. If his expression had authority and a certain austerity, he had a disarming smile that lighted his face and had a suggestion of tolerance, humanity, and utter sincerity. But he struck me as rather tired and worn. In repose, his face was deeply

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lined, his eyelids had a tendency to droop like those of a man desperately short of sleep, and his shoulders sagged a little. Yet where is the surgeon who, in latter life, does not show such signs of wear and tear?

For a while he chatted to me pleasantly, the Administrator remaining quiet—which surprised me, for I could not think he had called me in simply to talk to Condor; the Administrator was a very busy man who never wasted a minute of his time. Condor seemed greatly interested in what I had done, where I had been and what I intended to do. He told me he thought I had been courageous to become an intern after I had done so much, and hinted, though not openly—perhaps the Administrator was a restraining influence—he thought it a pity these things had to be. Then he asked me if I had regretted taking the step.

‘Quite a lot,’ I replied. ‘But I think I’ve shaken down, and I think I shall stick it out now.’

‘That’s just what I want you to do,’ he commented unexpectedly. ‘The Administrator and I have a little proposition we’d like to have you think over.’

I raised my eyebrows and glanced at the Administrator, who took up the tale; and as he went on my amazement grew so that I could not believe that it was not all some fantastic dream of wish-fulfilment.

The Administrator spoke in that curious dry, abrupt tone that Americans use when they are discussing business. Till one grows used to it, it is a little alarming to ears attuned to English voices. I cannot hope to reproduce verbatim all that he said, and it would, I think, be wearisome to do so in any event. A summary brings out the details of that astounding proposal more vividly.

Condor, explained the Administrator, was no longer a young man; he was in fact in his sixty-eighth year, old indeed to practise the delicate art of plastic surgery, and he was beginning to feel the strain of his years and overwork. On top of that, he had not been feeling too well lately. The sum result was that he felt he wasn’t keeping

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on top of his work. So, when he had heard that I, a plastic surgeon of some experience, was serving an internship in the hospital, he had made a suggestion to the Administrator that I should be his surgical intern for a month, and then, if everything turned out all right, I might complete the rest of my year in the same capacity.

I was overjoyed. From my point of view nothing could have been more desirable. As Condor's intern I should have every possible opportunity of watching him, learning from him, and perhaps discussing cases with him. But I failed to see how it was going to help Condor. One junior assistant more or less would hardly make much alteration to his burden. I put these points to the Administrator.

It was Condor who replied, giving me that enchanting smile as he did so.

'I guess you'll have to be an intern because that's all the law allows you to be,' he said. 'But we don't plan it shall work out just that way. An intern mayn't operate by himself, but he can operate if there's a recognized surgeon around ready to take responsibility. That's the way it will be. You'll operate about half of my cases, but I'll be right there if you need my help. We haven't another man round here I care to have—and we certainly haven't one with anything near your experience. Maybe I've a few ideas of my own you'd have to learn, just so we don't disagree. You wouldn't mind that?'

'There's nothing I'd like better,' I said—and meant it.

'O.K. When I heard you were around, Sava, I just felt my good fairy had sent you along to be right here just when I wanted you. Maybe, as you're Russian-born, you'll say it's destiny.'

'If it is, then for once she's dealt me a full house.'

He chuckled, and the Administrator, in his precise tones, began to outline the formal details. There could be no guarantee I should remain with Condor after the first month; as a general rule he did not like having interns in one department for the whole of their time, and it might

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be difficult to make an exception, unless there was a very, very sound reason for it. Nor was I to think this meant promotion or any sort of changed status for me. I remained an intern, neither more (which would have been easy) nor less (which would have been impossible). What use Dr. Condor might make of me was, of course, his responsibility.

It was, summed up, not much else than a discreet warning to me not to give myself airs when I was with the other interns, and a reminder that, however closely I might work with Condor, I was still very much an employee of the hospital and under his ultimate control. I hardly needed either the warning or the reminder.

Condor shook hands with me and told me to be in his office early next morning. Like every other American surgeon, even of the greatest eminence, he started work early and kept on unremittingly all day, so I was not surprised when he named eight o'clock as zero hour. But the more time I spent with him, the more I might gain in experience, and every moment might be precious if the Administrator's warning was serious and I might be in the plastic-surgery department only a month.

I walked out of that office still convinced that I was dreaming and that I might wake up at any moment to discover the dreadful truth that I was faced with another day's routine work as an ordinary intern. In fact, I was a trifle bemused—but by the reality of great good fortune, not by the illusory visions of a dream. I neither saw nor heard anything. In my trance-like state I walked straight into a projection on the corridor wall. My head hit it with a resounding crack that completely banished my reverie.

One of my fellow-interns, who happened to be passing, stared at me open mouthed—revealing a large and inevitable lump of chewing gum, a substance that failed to appeal to me, even in my role of intern, though otherwise I did my best to observe the tribal customs.

'Say,' he drawled in astonishment, 'what goes on around here?'

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'Just making sure I'm not dreaming,' I replied. 'Better than pinching myself.'

He stared again, wondering, perhaps, if the strain of internship was not proving too much for a man of my years. One or two of the interns had occasionally called me 'Pop', and this young man was one of them.

'Maybe that way you'll start dreaming,' he said. 'I just can't think of any way better to get concussed.'

He went on his way, I on mine. I had to keep reminding myself of every detail of the interview to convince myself of the astounding truth. I was reprieved from durance vile, for a month at least. Tomorrow I could forget about giving blood transfusions to patients who would be operated on by someone else, cease to worry about dressings and medicines for patients who had already been operated on by someone else. I was to be a surgeon again myself. But even if I was not to operate, if I was merely to be the most junior of assistants to Condor, I would still have considered myself the luckiest of men. Destiny had spoken, as Condor himself had suggested; and she had, in the Shakespearian phrase, spoken me well.

That next day to which I looked forward was the first of an association that began auspiciously and with the promise of high achievement, and that ended, after all too short a span, in stark tragedy. But let me take events as they came in a month of which every day was memorable.

From the very first, my luck was running strongly. Condor was a perfect chief or colleague—he treated me more as the latter than as an assistant or deputy—and to watch him perform even the simplest plastic operation was a joy, for he would illumine it with his genius. Moreover, we took to each other instantly, and there were times when, I think, he resented the law that made it necessary for him to be present when I operated; with his fine sensibility he believed that I might get the idea he was supervising or instructing me—not that I should

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have cared if he had. He paid me, too, what I think is the greatest compliment I have ever had in my whole professional career, one that was all the more sincere because it was never put precisely into words: he took it for granted that I could perform any operation that he could, and that what I did should be judged by exactly the same standards as he applied to his own work. More than anything else that re-established myself in my own eyes and compensated for all the frustrations I had received, both in America and elsewhere. The worst trials of an internship were an inadequate price to pay for the feeling of confidence and fulfilment that his attitude gave me.

Condor was in every way the complete plastic surgeon, with a touch of originality in all he did. But there was one operation that he had made peculiarly his own, and, in so doing, had revolutionized it both in technical efficiency and in status. This was the procedure which, as 'face-lifting', brought plastic surgery into the news in the years between the wars, and tended to degrade it in popular esteem, after its fine triumphs in the First World War, so that it became the prey of quacks and unqualified 'beauty specialists'. Even today, something of the old disrepute, so ill deserved, still clings to it, especially in England and in Europe, and some people continue to insist that face-lifting is an unnecessary, even evil, operation resorted to only by ageing, idle, rich women, in a vain and frantic attempt to recapture their dying youth, and to gain or hold the attention of worthless young lovers when the power of wealth seems to be waning.

This view is, of course, wrong and perverse, yet it contains one or two grains of truth, which have enabled it to survive into a period when plastic surgery as a whole has become generally recognized and its contributions towards making good the terrible disfigurements of the Second World War are universally acknowledged.

The general principles of face-lifting in its ordinary form are now widely known, but it will be as well to state

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them briefly here. In its simplest form it consists in the removal of a strip or strips of skin from a suitable position on the face—as, for example, along the hair line of the scalp or behind the ears, in neither of which places are scars visible—and then closing the gap by lifting the remaining skin of the face. The result is that wrinkles are stretched out and sagging and bagginess are eliminated. There are, of course, many refinements in modern methods, but the basic principles remain.

As I have said, there are valid criticisms of this procedure, and none is readier to admit them than the plastic surgeon. In the first place, the correction is only on the surface; the cause of the wrinkles and bagginess—loss of fat and stretching of muscles and tendons with age or through illness—remains. In time, the defects reappear, and then very often the operation has to be repeated. Obviously, it cannot be performed over and over again, and a limit is reached when no more skin can be excised.

Another objection, also not without some force, is that this tightening of the skin dehumanizes the face. The individual lines of expression, which are the marks of character, are ironed out as it were, and an unskilfully performed face-lift, such as those carried out by the quacks of the 'twenties and the 'thirties, results in a mere mask.

The skill and experience of the modern plastic surgeon can go far to minimize these disadvantages but can never completely eliminate them and it was to rectify this state of affairs that Condor brilliantly devised his new method. Enthusiast that he was, he had two aims in view. One was to bring the operation into line with the other techniques of modern plastic surgery, which aims not at mere palliation of defects but rather at fundamental reconstruction and correction of what is wrong, together with permanency—aims which, it is true, are not always capable of fulfilment, yet are realized surprisingly often. The other was to ensure that the results were aesthetically satisfying

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—that the lines of expression should be preserved, that there should be no characterless masklike appearance, and that no scars should be visible.

In these exacting aims, he was successful. To apply the term 'face-lifting' to his revolutionary procedure is utterly and completely false. It is not simply a method of face renewal, for he has often employed it not merely to correct defects that age or illness has brought but also for making good the lapses of Nature. It is, in fact, nothing less than scientific face-reconstruction, with the surgeon in the role of a sculptor working, not in stone or wood, but in human tissues, and the operation demands the highest surgical skill, as far beyond the resources of the quack and the beauty parlour as, say, modern brain surgery is beyond the skill of the bone-setter.

It is a difficult operation to describe even when technical terms and diagrams can be used, and to reduce it to simple, everyday words is impossible. This alone need be said: that it is concerned with the complete reconstruction of the face; adjusting stretched muscles, fascias, and skin, and restoring vitality to flagging tissues. The procedure is complicated and demands not only very great skill but also a fine aesthetic judgement on the surgeon's part. And when it has been properly and completely carried out, no scars are to be seen anywhere, and the resulting face is absolutely natural in appearance so that it is impossible to suspect that an operation has been performed. It ranks, indeed, as one of the greatest triumphs of plastic surgery; and it was this, more than any other single item in a brilliant and fertile career, that had established Condor among the greatest names in plastic surgery. By one of the cruellest ironies of fate, it was also, by its very perfection, eventually to cast him down into the depths of tragedy.

Perhaps only in the United States would Condor have been able to develop this intricate procedure so rapidly to perfection. There at least whatever prejudices once

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existed against face-lifting, or face reconstruction, have been swept aside. The American woman sees beauty more consciously and with greater determination than the woman of any other country, not excluding France; and because American ideals of what is and what is not feminine beauty tend to be dominated by 'typage'—how often visitors to the States complain that all American girls and women look alike!—there is a greater tendency there for women to undergo surgical correction to bring them into line with the ruling ideas. Perhaps a plastic surgeon should not say so, but it is at least arguable that there is too great a desire to obtain uniformity at the cost of individuality.

But men as well have facial corrections in the United States, and even I, when first working with Condor, was astonished at the fact that the number of male cases on his books was almost as great as that of female ones. This is, not, as it might seem in England, either vanity or effeminacy. It is the direct outcome of a system that looks on men of forty-five years of age and upwards as too old for employment, except in special cases, and not only will not engage them at that age but actually retires them. Many men make plans to give up work about the age of forty-five and, in fact, do so; others have the signs of middle age removed from their faces, and then present themselves to employers as five or ten years younger than they are.

Just as the popularity of facial operations in America had enabled Condor himself to develop this procedure to an exquisite perfection, so on a lower plane, the large number of cases on his books provided me with opportunities, first of studying the technique as practised by its innovator, and secondly, to my great delight, of actual performing the operation under Condor's own direction. That was indeed an experience which I shall never forget.

As I have already mentioned, there grew up between us almost from the first day a friendship that was stronger

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and more personal and intimate than a mere professional association. We had, besides an absorbing interest in plastic surgery, a number of things in common. Neither of us was American born. Both of us had studied and begun our professional careers on the continent of Europe though he had never practised in England, as I had. It was these personal links that helped to make our collaboration quite different from the principal-and-deputy relationship it was nominally supposed to be. For me those days of working together were richly rewarding, not only because from Condor I learnt, in the course of a few weeks, more than I had done previously from any other surgeon, but also—and no less—for the profound experience of being day by day in the presence of a dedicated man.

I think, too, I was privileged to provide him with something that he had hitherto lacked—a friend to whom he felt he could talk with complete freedom and to whom he could reveal his inmost thoughts—though it was not until later that I came to understand why this should be so. A famous man occupying a position of great eminence, Condor was nevertheless, when I met him, a man who was spiritually lonely, and there appeared to be none in the large circle of acquaintances, both professional and social, that such a man attracts, capable of banishing that loneliness. That I should do so, stranger as I was from another country, is one of those mysteries of human behaviour that will never, in my view, be resolved by science, whether psychological or physical, for they are an integral part of essential humanity, which some people call the soul.

Often, when the day's work was done, he and I would meet, perhaps at his apartment, perhaps over a quiet meal in some quiet restaurant, and our talk would range far and wide. Always, however, it tended to return to plastic surgery, which to both of us was a ruling passion. It was not something to be put away and forgotten, like a file in a

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drawer, when the time came to lock up the office and close the day's appointment list. Whether the talk was of our profession, turned to personal affairs (as it did often on the most intimate level), or developed into an argument on some topic that chance had thrown up, he was always revealing. He could illuminate a difficult subject, even one outside his speciality, with a striking phrase that showed how penetrating was his thought, yet he was never assertive, aggressive, or opinionated; he possessed that humility which is one of the marks of true greatness.

Frank and intimate though he was towards me, I nevertheless could not fail to notice that he seemed to have some anxious secret; it hung like a cloud over him. And there was one very curious aspect of it that puzzled me considerably in those early days of our friendship. At that time we rarely met without our coming, sooner or later, to the facial operation he had devised. For my part I was keen on learning all I could about it, and for his, he was ready in this, as in all things, to lay all his vast store of knowledge before me. Yet it was at these moments that I was most aware of the shadow across him. He would explain, elaborate and comment with a wonderful lucidity. But he never showed any enthusiasm for his subject; it was almost as though he had lost interest in it. This strange attitude was not part of that humility I have mentioned nor did it arise from any false modesty, for on other fields of plastic surgery he would become enthusiastic and took a fully justified pride in what he had done. It was not a topic to which I could refer openly. His kindness to me had not conferred on me the right to pry into his affairs. It might, after all, be no more than a mistaken impression of mine, though I did not think so.

One evening, when our friendship had ripened and we were in his apartment, the conversation had, as usual, veered round to the facial reconstruction. I had worked with him on a case that day, and he himself had raised the subject to enlarge on one of the more subtle details of

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the procedure. When he had finished his explanation, which had resolved all my difficulties, he fell into a silence that I did not like to disturb. Then he went to his desk and took out an envelope which, when he had reseated himself, he placed on his knee.

He smiled at me a little wearily.

'One of the first cases I ever had of this kind,' he said quietly, 'turned out to be rather more important than I expected. No, I don't mean just technically. It walked right into my life and took hold of me. I guess you ought to know about it, George.'

I glanced at him quickly. His voice, no less than his words, seemed odd and unnatural to me; and I noticed that his air of depression had intensified.

'It was about two or three years back,' he went on. 'I'd developed the main points of the procedure but there were quite a few details I had to work out. I still didn't know just how far I could go. You know the way it is with a new technique.'

I nodded.

'Then, right out of nowhere, a patient came to see me,' he continued. 'A young woman. She was twenty-five then.' He sighed. 'She had heard I could do anything with faces, she told me. She wanted me to make hers as different from what it was as it could be. Just why she put it that way, you'll see for yourself if you look at those.'

He handed me the envelope, and I drew out a number of photographs. He had aroused my interest, not only by what he was telling me, but even more by his manner, which had an indirectness and a reluctance that were unusual in him. But when I looked at the photographs I forgot, for the moment, his strangeness. What I saw shocked me.

Looking out at me from the glossy prints were the features of a woman. She was, I think, the plainest, dullest woman on whom I have ever set eyes, and by the standards of Hollywood, the smart magazines, and the

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advertisements—which are also the aesthetic standards of millions of Americans—she was downright ugly. She had none of that smooth, streamlined appeal which is supposed to be indispensable to the American girl. Her chin receded so markedly that there was a simian suggestion about it. Her nose was distorted. She was impossible to describe in words, and I understood now why he had given me the photographs without comment.

‘And that’s how she was,’ he said, when I laid the prints aside, though I had to keep glancing at them again. ‘You’ve been in the States long enough, George, to know there’s not much chance in any place for a woman like that, and right here in a State dominated by Hollywood she might just as well never have been born. No-one would date her and no man would marry her. No boss would hire her, except maybe to wash up the dishes way out of sight some place. She had gotten psychological involvement, too—she had to. She didn’t care any more how she looked. It was just that which brought her right along to see me.’

He paused but I made no comment, so he resumed.

‘I guess I didn’t know what to do. I didn’t have much hope I could correct all those defects. It meant making a new face—just that. I wanted to tell her to run along, but she guessed it and she began pleading with me. So I took the case. It could be it would clear up some of those snags for me.’

He tried to sound flippant as though excusing himself for a piece of folly, but I could see he was worried, and it was costing him an effort to tell this story. After another brief thoughtful pause, he took up the tale again, but his voice had changed. He was explaining now precisely what he did and how he did it, and to me it was a fascinating lecture. But there is no need to go into surgical details here. All that matters is that he carried out the operation in three distinct stages spread over some little time, and when all was finished, he had ‘learnt a whole lot and

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maybe the girl wasn't that bad she couldn't make a date or two'.

I waited for him to continue. His story had none of the completeness that normally marked what he said. But he sat back as though he had finished.

'Have you', I asked at last, 'any photographs of the result? I'd like to see them.'

His reply was quite unexpected.

'I had that girl shot from all round,' he said. 'But right now, George, you're not seeing them.'

'I'm disappointed,' I murmured, hardly knowing what to say. He was being quite abnormal. Never before had I known him act so strangely. His refusal surprised me so much that, for a fleeting moment, I wondered whether this case was not the skeleton in his cupboard, a great failure, which had haunted him ever since. I could not believe it. It was impossible to imagine that he would, if my guess was right, have led me to infer that he had had at least some success. Such petty deception was unthinkable in James Condor. I could not know then how close to the tragic truth I had come by fallacious reasoning and in an utterly wrong context.

When he rose, I thought he had relented and was going to fetch the photographs after all. But again he surprised me.

'No, George, we're going out right now to meet the girl herself. It'll be much better that way.'

My sense of disappointment and doubt left me. Certainly that would be the best way of all. It was going to be an interesting evening—and once again I came to the truth for the wrong reasons and in the wrong setting.

We were to meet the girl, who, he now told me, was called Yvonne, in one of the quieter of the fashionable bars of the city. As it was not far, he proposed we should stroll to our destination, an idea that I heartily welcomed, for a short, leisurely walk in the pellucid night air of California would be a relief from the somewhat stuffy

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atmosphere of his apartment. As we walked, his manner changed again. He seemed filled with suppressed excitement, which he was doing his best to dissemble. I wondered what it foreboded. He was certainly strange that evening.

He was not to be drawn when I casually referred to some detail of the case. He evaded my remark and changed the subject, like a man trying to distract his mind from thoughts which are proving almost unbearable.

'You've written a few books, George,' he said, 'so maybe this will interest you. I've had publishers around asking me for my life story.' He named five of the leading American houses. 'They don't seem to know the meaning of "no". Why the heck anyone should be interested in my life story, I just can't imagine.'

His comment was quite sincere. To him, the only interesting thing in his life was his work, which was described in those journals which circulate among doctors. But it was an interesting and illuminating sidelight on his standing in the United States. So far as my experience goes, publishers are not in the habit of badgering surgeons for autobiographies. Those of us who for whatever reasons, good or bad, are moved to set down on paper some of our memories find, more often than not, that the one thing publishers (whether English or American) do not want is medical and surgical autobiography. But this is by the way.

By now we had reached the bar, where Condor was obviously well-known. He ordered two highballs, and as we sat with our drinks before us I kept the doorway, of which I had an excellent view, under close observation. I had studied those photographs of Yvonne carefully, at the same time trying to decide how I might have gone about reconstructing the face, in the very unlikely event of my having allowed myself to be persuaded to undertake so difficult a task. I was quite excited to see whether Condor's conception agreed with mine; I felt sure I should recognize the girl. Quickly I shot a glance at Condor. His

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eyes, too, were fixed on the doorway. His excitement had increased—but hardly from the same cause as mine.

It was, as I have said, a fashionable bar. The women who came to it with their escorts were all expensively dressed, and they arrived in large, streamlined cars. I took no particular notice, therefore, when a huge Cadillac drove up and a young woman in a magnificent fur-wrap got out of it. For some reason or other I had not expected Yvonne to come like that.

The woman came easily into the bar, as though it was familiar ground, and my glance lingered on her momentarily. She was beautiful—there was no other word. Even in that gathering of expensive, well-groomed, typically American women, she was outstanding, and I noticed that men's heads turned as she passed and their gaze followed her. She could easily have passed for a film-star of the better kind.

My eyes turned to the door again. I hate waiting for people and was beginning to grow a little impatient. And then Condor leapt to his feet with a little cry of delight and bounded forward—towards the girl whose entry had caused that minor stir among the men. His arm slipped round her shoulder as he brought her towards our table. As I rose, he turned his face towards hers, and on it was an expression of joy I had never seen there before.

'Yvonne,' he said, 'I'd like you to know Dr. Sava, a colleague of mine. Miss Yvonne Delmont,' he added to me, 'but I guess it's friendlier to keep to Yvonne and George.'

So this was the girl! This was the exotic creature that the genius which lay in Condor's brain and hands had conjured out of the pathetic and plain little nondescript of the photographs. Yet it was incredible. If anyone but Condor had been concerned I might have suspected one of those elaborate, pointless practical jokes in which even eminent American professors sometimes indulge, spurred on by that rather childish spirit which also bands them together into fraternities and guilds and secret societies.

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But Condor was above and beyond such things; his sense of humour was far more subtle and sophisticated.

I had, in a very special sense, to take this beautiful woman at her face value. It was uncanny. In my mind's eye every detail of those 'before operation' pictures had been clearly fixed; it is a professional habit to memorize such things automatically. Only when, point by point, I had mentally compared this face in reality with that on the photographs was I finally convinced.

Before in these pages I have spoken of seeming miracles; perhaps I have overworked the word. But I must use it once again; for this was indeed a miracle. That face was perfect—yet stopped short of the soullessness of absolute perfection. In contour, proportion, and balance it was inescapably right. It had character, charm, intelligence—and the trace of hardness I detected in it was, perhaps, the real character, for a girl who had spent nearly thirty years in the condition of the photograph would inevitably have developed a certain hostility to the world. The texture of the skin and the shape of the mouth, after all allowance for the skilful make-up, were seductive. . . .

Suddenly I realized I had been goggling at her like a gawky schoolboy for I do not know how long. I hastened to apologize—though I knew that American women have by no means the Englishwoman's aversion from that kind of attention.

She accepted my not-too-adroit apologies with a low, attractive laugh.

'You're forgiven,' she said. 'I'd come prepared. Jimmy had warned me he was going to show me off to a fellow connoisseur. How do I make out?'

'You're perfect,' I replied, so seriously that she laughed again.

'You're the sort of man I like to have around, George.' She looked thoughtful. 'All the same, it's kind of queer sometimes to think I've my looks from a man who isn't my father.'

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She patted Condor's arm; and now I was temporarily free from admiring his handiwork I noticed something else remarkable. Condor was transformed. His face was illumined by an ecstasy that was generated in his very soul. The traces of the years, which I had noticed on our first meeting, had fallen from it; he was a man ten, perhaps twenty, years younger, and the breath of Yvonne's beauty had blown away the cloud that had been hanging over him. This was an astonishing transmutation—it was nothing less. And the look in his eyes revealed the cause. He was in love with Yvonne, deeply in love to the point of adoration. And that this should be was no less a miracle than that he had wrought on Yvonne's face.

They were talking together now, and I could not decide whether she returned his love. She was fond of him—yes. But could a woman of twenty-seven passionately love a man already in sight of seventy? It might be, but it happens very rarely. Nor did I pursue the question. When my eyes lighted on that face again and I remembered what it had been, I felt my disbelief returning, to be replaced in a little while by a dominant admiration for the man who had created it. Only a man of intense creative vision could have conceived that face. Inconsequently and egotistically, I found myself reflecting how greatly fortunate I was—and also how unworthy—to have been singled out to collaborate with such a genius.

I sighed involuntarily, and Yvonne looked up with a smile.

'Why, Jimmy, look! We're leaving poor George right out in the cold—but I guess he's been having lots of fun stripping my face down. And, Jimmy, you haven't fixed me with a drink! I'll have the usual.'

The waiter brought one of those strikingly coloured cocktails of elaborate composition in which American women seem to delight, and for a little while we chatted. I found it difficult to place her in any background. She was obviously well-off: her clothes, her car, the sidelights

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on her life given by her conversation, all these things proved that. No less obviously, she was not married; and she had no near relations, for she told me she had been born in Florida (which explained the French name) and her folks had died way back when she was a kid. She had come west to get away from the scenes and people she had begun to hate. I could imagine her as, perhaps, an exquisite model for a Paris *couture* house, for painters and photographers. But again her talk dismissed the notion that she worked; she seemed to do nothing but lead the fashionable life of Society in a city that was by no means the cheapest in the United States. I repressed my curiosity. It was no affair of mine.

It was she who broke up the party. She had to get along to another party, and Jimmy needn't be jealous because it was an all-women affair: something to do, I gathered, with organizing gifts to the boys in Korea. But she'd drop us off at Jimmy's apartment, and maybe she'd see me around again some time. Jimmy would see to that. . . . It was all so smoothly done, the work of a woman used to having her way and organizing menfolk as she liked, that neither Condor nor I even thought of objecting.

When we were back in the apartment, Condor became restless and silent. He paced about the room, mixing drinks we did not want for himself and me, stopping suddenly in his perambulations as though struck by some important thought, and generally behaving like a cat in an unfamiliar room. It was time, I decided, to go; and I rose from my chair, my drink still untasted.

'No, don't go, George.' He waved me back into the chair with an impatient gesture. 'I'm trying to work out just how I can say what I want to say to you.'

He was silent again, and I waited. In his present mood he was testing our friendship to the limit.

'You can see the way it is with Yvonne and me?' he asked suddenly. .

I nodded. There was nothing I could say.

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'Yes. I like it that way—that all the world knows. It just happened, George. I operated and I couldn't believe that it had succeeded like it had. It seemed impossible. I felt sure something would happen so I kept her under regular observation. In any case, I had to make a complete follow-up after an experimental case like that was. Honest, George, it was no more right back at the start. She came along every week, and I examined her thoroughly. It all seemed perfect, but I still told her to come along regularly. I fooled myself it was cold scientific interest, a hundred-per-cent follow up. Then one day I took hold of the truth. I did not have any interest in the operation any more, I only wanted to see Yvonne. I loved her. I'd never loved anyone that way in my life before. The operation was just a dream—it hadn't happened. Yvonne had always looked the way she did. That was how it seemed to me right then. You know, George, till I showed you those photographs this evening, I hadn't dared to look at them in years. That was why I let you take them out of the pack.'

He was leaning forward in his chair with his elbows propped on his knees and his chin cupped in his hands. All the time he stared straight ahead as though he were looking into the past and seeing each event as it had happened.

'I told myself to snap out of it. What would a girl like Yvonne have to do with a man like me? An old man, George, old enough to be her father or her grandfather even if I'd been one of the boys that break into the news these days. But that would not work. It couldn't. You can't reason yourself out of love. If reason was greater than love, I guess romance would be in a bad way.'

He smiled thinly, passed his hand through his hair, and took a sip from his glass. Then he continued with his tale. I shall try to repeat it verbatim. The phrases of his beginning have seared themselves into my memory, so that I can recall everything—his intonation, the little gestures

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he used to emphasize his words, the break-through now and then of his native accent, which gave his American-English an odd sound, and which indicated infallibly that he was deeply stirred and very serious. But the whole affair was like a nightmare, not least because some of it as I have just explained remains vividly real while the rest is blurred in detail though the general sense is clear. So I shall summarize the remainder of his story, which retained to the last a touch of the macabre. Moreover, though I sat with him far into the small hours, not all the facts emerged then. Some of them came out later, but I have combined them all here into a simple, straightforward account.

By turns, Condor's story was pathetic, moving, and infuriating, as all such tales of men who try again to tread the paths of youth must be. Once he had become convinced or had convinced himself that he was in the grip of a *grande passion*, nothing else mattered. He was prepared to face all the consequences and the problems that it brought. Those difficulties were formidable enough. Condor was a leading figure in the professional and social life not only of California, but also of the whole United States. He knew that if he chose to follow where he believed love was leading, he would have to do so not along some secret path but along a broad highway floodlit by the sensational publicity that is typical of the American Press; nor would that publicity be confined to the venomous paragraphs of the columnists, for the story of the ageing professor falling in love with a young woman whose beauty he had himself created, and prepared to give up all for her, would be irresistible to city editors from coast to coast and provide a theme on which star-writers could devise endless variations. Fact, half-truth, and downright invention would be swept together in an amalgam of sex and 'romance'.

But he was more concerned with the immediate personal problems he had to face. He had been married for many years, and his two children were now grown up, though

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both lived at home. Of his wife he had been and still was very fond; but the innumerable ties that marriage and bringing up a family forge, ties that so often prove stronger and more durable than what is usually called love, could not survive the heat of the passion that was flaming in him. And now, he believed that his love was returned. Yvonne had not rejected him, nor even seemed indifferent. True, she did not express a devouring love for him, such as he professed for her. But that, he told himself with the self-delusion to which all lovers are victims, would come in time.

It might be true that, as he put it, 'love made him a different man, so that he felt he was basking in the sunshine for the first time in his life'—an extravagant phrase that sounded rather startling on his lips, though it was clear that he believed it; but his essential honesty and sincerity remained. The idea of an *affaire*, which might well have passed almost unnoticed or at any rate uncommented upon, appalled him. He loved Yvonne and his only honourable course was to marry her. There must be no hole-and-corner business about it. He was not going to conceal furtively something which inspired and reanimated him. With the quiet direct courage that was so characteristically his he resolved to tell his wife the truth. It was a terrible thing to have to do. It meant throwing away so much that he had valued and valued still. But he could accept no other line of conduct.

He glossed over that interview with his wife, which was probably the most searing experience he had ever undergone, but he did not disguise how much effort and mental torment it caused him. She had taken it well, and had not attempted to reason with him, perhaps realizing that, to adapt Condor's own phrase, reason is the enemy of love, and appeal to it is apt to bind the lover more firmly to her folly. She refused, however, to make an immediate decision on his plea that she should divorce him. She wanted time for reflection herself and she may have thought there was a chance that in a little while this passion might die as

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suddenly as it had blazed up. If she had thought that, she was mistaken. The passing months increased his ardour and hardened his resolve. In the end, she consented.

A settlement was drawn up. It was generous to the point of foolhardiness. The Condors had never lived extravagantly, and for some years now their income had been enormous, from a surgeon's point of view. As a result, Condor had saved an amount that was a not inconsiderable fortune. This he passed over to his wife, for her use and the children's in its entirety and without restriction. He assigned to her the greater part of his earnings as well, and gave her the fine house that he had built in one of the best positions on the outskirts of the city. Condor himself did not tell me this, and I learnt it from a close friend of both of them.

Now he was waiting for the divorce. When that had been granted, he would marry Yvonne, and he spoke of the untold joys to come with the naïveté of a very young bridegroom-to-be. To me, that was pathetic. It was incredible that this man, sitting in the chair, his hands still cupping his chin, and mouthing sentiments that, from one of his years, sounded utterly banal and saccharine, was the same as the surgeon with whom I had been operating less than twenty-four hours before, the surgeon who had performed that miraculous reconstruction of Yvonne's face—and in so doing had forged the weapon for his own undoing.

I left him just as the clock was striking three o'clock in the morning. For the first time I was glad to get away from him. He had saddened, depressed, and enraged me. The chill night air blew gratefully on my cheeks and revived me, but I could not shake off the forebodings that filled me. Here was tragedy enough already; yet I felt that worse was to come. He was not merely rushing headlong to his own doom, but was actually spurring himself along. It was a terrifying thought.

The next morning—or, I suppose I should say, in the

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language of the stage directions, 'later in the same morning'—he surprised me again. He was happier than I have ever seen him. The anxiety of the immediate past had left him. Perhaps in telling his story to me, he had lightened the burden he had been bearing single-handed for so long. Philosophies as antagonistic as those of the Roman Catholic Church and Freud, agree that confession is good for the soul—though the Church calls it confession and absolution, and the psychoanalyst abreaction.

He made no reference to our long talk and his personal affairs, but he spoke much of our professional relationship. He would persuade the Administrator, by force if necessary, to allow me to stay with him till my year was up; he would never be able to get along without me now. And then he augmented the great tribute he had paid to me in taking me to work with him, by proposing, with the air of a man who regards the matter as already settled, that when I was registered in California, I should become a partner in his private practice for a little while. The last phase of his scheme, which he put in all seriousness and sincerity, was that in a very few years now he would have to retire, and then the practice would be solely mine. It took my breath away. But there were, I told myself, too many other problems looming up across Condor's immediate future path, for either of us to discuss plans so far ahead. I thanked him sincerely, and said I would think it over. He seemed satisfied.

From that point, the tempo of events quickened to *vivace prestissimo*. It was as though, in telling me his story in such detail, Condor had been obeying the dictates of some invisible play-director and preparing me for the ensuing final scenes in which I was to take a leading part. My cue bordered on the fantastic.

It was late one evening, a few days later, and I was beginning to think of bed, for I had had a busy day, when I was called to the telephone. When I picked up the instrument, all I could hear was the sound of heart-rending

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sobs. They were a man's sobs, too, and they so astonished me that for a moment I could not speak. Then I said 'hello' quietly.

Thé sobs abated a little, and there was a gulping sound as though whoever it was at the other end of the line was trying to control himself. A voice came, asking in a strangled tone, if I was Dr. Sava. That voice was strange, distorted, but I could have sworn it was Condor's. But it could not be. No-one outside a lunatic asylum could imagine that Condor could break down like this—or even that, if he was moved to tears, he would not disguise them.

But the unbelievable was happening. It was Condor speaking. Could I come at once? He needed me badly. I told him I would be round at once and hung up the telephone. Now that I had recovered from the first shock, I realized it was not so incredible after all. Condor's story had shown that anything was possible.

He opened the door to me himself. Tears were streaming down his face, and he was unable to speak. He gripped my arm as though mere contact with me reassured him and motioned to me to go into his study. Wearily he sat down at his desk and then he handed me the letter. To this simple act he gave a curious significance. I felt that he hated to let it out of his hands for a second, that it was a thing at once detestable and precious to him; and all the time I was reading it, he kept his gaze fixed upon it as though he feared I might pocket it and run off with it.

I had guessed at once. It was from Yvonne. It was not very well composed, and it looked as though she had great difficulty in writing it. Yet though it could not but wound and torture Condor, it had an odd air of sincerity which its unshapely phrases confirmed.

She said quite simply that she had thought very carefully over the whole of her relationship with Condor and had come to the conclusion that it would be best to end it—in fact no other course was possible. She was sorry if

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unwittingly she had encouraged his hopes, but quite honestly she had been unable to decide what her real feelings for him were. At the beginning she had thought that she loved him in the way he loved her; but it was not so, and she realized now that what she had mistaken for love was a very deep affection, such as she might feel for an adored uncle, which had been inspired in the first place by her overwhelming gratitude for the operation he had performed on her and increased by his subsequent generosity to her. She hated having to say all this but it was only fair to be frank with her greatest friend and benefactor. The discrepancy in their ages was far too big—and so on. It was a long letter and repeated itself, but it left no room for doubt and I believed that it had been written as she said it had been—out of a desire to be fair to a man whom she regarded as a great and helpful friend and whom she could have loved as a father. How different things might have been if Condor had allowed them to remain at that level! For a regard for him, a great affection for him, was no more than he had any right to expect from a girl forty years his junior.

Condor was my friend. I owed infinite gratitude to him, as Yvonne did. Before my eyes was the testimony of the pain and grief this letter had caused him. Yet I could have cried out with relief. All would be right now, I decided. He would recover from the shock, and then he could forget these romantic dreams that could never have been anything more than an illusion untranslatable into reality. When he had seen matters in their true light, he could turn again to his real work, giving it once more all his brilliant attention.

I wanted to tell him all this, as his friend and colleague. But as he held out his trembling hand to take Yvonne's letter and began to read it yet again, though I was sure he already knew every word by heart, I knew that to do so would have been the ultimate refinement of cruelty. For he had suddenly become an old and broken man. He

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looked pathetically helpless and crushed. Towards him I felt myself protective, as a father to his child.

Though I struggled to find words of sympathy and condolence, none came; and I believe he appreciated my silence more than he would have liked a flow of urbane, conventional vague sentiments.

Slowly, he stretched out his hand and gripped my arm again.

'George,' he whispered.

'Yes?'

'Will you do something for me?'

'Of course. Anything I can to help you. You know it.'

He nodded slightly. 'Yes. Go and see her, George. Plead with her. Tell her the truth—that I can't live without her. She's everything in the world to me, George—everything. Nothing matters to me now but her. Please, George—I ask it.'

'Yes. I'll do it tomorrow.'

'Tonight, George. I can't face the night in doubt.'

I pointed to the clock. 'Look—it's past midnight. It will be better for everyone tomorrow.'

At last he agreed. I spent the night with him and insisted on his taking some sleeping tablets. In the morning he was better. His loyalty to his patients, the force that had driven him for perhaps forty-five years, asserted itself, and he came to the hospital to see them. But he left most of the work to me. His hands were still trembling. Yet his brain remained clear, and there were times, when, watching him out of the corner of my eye, I was certain that if only he could carry on with his work, he would recover his equanimity.

In fact, by lunch time he was already calmer and more prepared to face reality. He told me he had telephoned Yvonne, for he had decided he would like to see her with me by his side; it would be better than my going to her alone. It was a decision that relieved me. I was ready to do his bidding, but to act as a go-between, a conciliator

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faced with a task I knew was hopeless, was something for which I had no relish.

It was not at all a cheerful dinner. Yvonne was ill at ease, and Condor just sat tongue-tied, content to gaze at her. Once or twice, I thought I saw a tear glistening in his eye, but there were no embarrassing moments. He was, I thought, afraid—and, if so, it must have been an unusual experience for him. He dared not raise the subject all of us had in mind lest he should lose even the chance of seeing her again.

We rose without mentioning the break. But Yvonne rose to the occasion. She drove us back to Condor's apartment, and then adroitly managed affairs so that it seemed the most natural thing that she should take me on to the hospital. I do not think Condor noticed that he had been quietly dropped out of the way.

Yvonne drove the car down the first quiet side turning and faced towards me.

'Well, what do you make of that?' she said. 'I feel very sorry indeed. I didn't think he'd take it quite that bad. He's a dear, George, the best man there is in the world. But I just couldn't marry him. You agree it would be impossible, don't you?'

I suppose my friendship for Condor should have come first, but I had to answer 'yes'. She nodded slowly.

'It doesn't make sense. You know, George, he must have been just crazy to have the idea at all. I was crazy, too, to believe that I had more than affection for him. But I did think it might work at one time. Honest, George, I did. But I worked it out. Maybe I'd want kids, and even if he could give me what I want at his age, I guess they'd have to grow up without a father. Yes, maybe that's the real reason,' she added thoughtfully. 'I want kids.'

'Is there', I asked quietly, 'anyone else?'

She shook her head. 'There's no-one right in view. I just have to settle this first. You know, George, I don't have much chance left. I'm twenty-eight.'

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She lit a cigarette and leant forward with her arms crossed on the steering wheel.

'You know, George, there'll be a few people around this city who will say I'm just crazy, giving it all up.'

'All what?'

'Didn't Jimmy tell you? No, I guess he wouldn't. Listen, George. The last two years I've had everything from him, everything I ever wanted, and he never asked anything for it. One-way street. Why, he wouldn't even come to the apartment because he had the idea it might compromise me. As if a girl who takes furs and jewels and a car, as well as the rent of her apartment, from an old professor of surgery isn't compromised right the way up already. But that's how it was. I'd just have to ask, and he'd have served right up for me. And he wouldn't even tell you. He's a great guy, George, and I wish he was younger. I'd marry him like a shot.'

'There's nothing we can do about it.'

'No.' She shook her head. 'But I felt I just had to be on the level with him and you, George.'

'Thanks,' I said. I looked at my watch. 'It's time I got back to the hospital,' I added. She took me there at once.

I knew the last secret now, I thought, as I undressed. Condor had provided her with everything. It said something for Yvonne, whose standing was now a little higher in my estimation, that she was prepared to give it all up just so that she could be on the level, as she said. And I was not so sure she would lose all her luxuries. Unless he changed very much, Condor was quite likely to go on paying for everything as though nothing had happened. The more I thought about it, the more I felt that that was precisely what would happen. But, as the pages of this book have shown repeatedly, I am a notoriously bad prophet.

We dined together on the Tuesday. On Wednesday, Condor came to the hospital in a somewhat dour and uncommunicative mood, but obviously determined to

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work. His absorption led me to hope that he had persuaded himself to find relief in the anodyne of work.

On Thursday, four operations had been booked, two of them quite important ones. As soon as he arrived, Condor told me I would have to perform all of them. He had had a bad night, he said. His face was grey and heavily lined. His stoop was more pronounced. There was a distressing tremor in his hands and lips. Forgetting where I was, I told him to go home and rest, but he reminded me with a sour smile that the law insisted on his presence. Otherwise there could be no operations. When the day's work was done, he asked me to dine with him, and afterwards I went to his apartment. It was quite like old times. We discussed everything—except Yvonne.

There was not a great deal to do on Friday, and he left early. I was feeling much happier about the outlook when he said good afternoon to me. I fancied from his manner that he had wrestled with his problem and come to some definite conclusion. That was a most encouraging sign. As he left me, he gave me the old familiar smile, and my hopes rose higher. I did not know that that was the last time I should ever see Dr. James Condor.

On Saturday there was no sign of him, but that was not unusual. When there was nothing special for him, he often stayed away to take a long week-end rest.

It was on Sunday that the news came, and it stunned not only me but everyone in the hospital. I picked up the great bulk of the Sunday newspaper and glanced idly at the front page, which invariably carried under flaming banner heads, the beginning of some luridly sensational story and a grossly enlarged photograph of someone concerned with it. As a rule I only cast my eye on that repulsive page, but that Sunday I stared at it, for there was something familiar about the photograph that stared out at me.

Then my mind reeled as understanding dawned. The picture was that of Condor. The huge headlines established the basic fact. James Condor had shot himself.

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Without waiting to read more I bounded to the telephone and rang Yvonne. A police-officer answered my call. Yvonne was being questioned, and who the hell was I anyway? I rang off without answering. If I had told him I was Condor's closest friend, a police-car would have come screaming up to the hospital within five minutes.

I returned to the newspaper and tried to disentangle the facts from the rich fabric of imaginative detail the reporters had woven round Condor. They had found a feast for their insatiable tastes. This was a story that had everything. A famous doctor at the city's biggest hospital had committed suicide. That was big news. A pretty girl, who lived in an expensive apartment, and whom he had wanted to marry, was concerned. That made it the biggest beat in months. Fame—girls—sex—frustrated romance—an abandoned wife and family—what reporter could ask for more? Nothing had been forgotten or overlooked, from the first rise to fame of Doctor Condor onwards, and a great deal had been added. As I scanned the lines, I began to feel a little sick.

But I managed to piece together the essential facts, which later I was able to confirm elsewhere. In its stark nakedness, the story has more horror than all the vivid inventiveness of the newspaper men could give it.

Late on Saturday night, Yvonne's telephone had rung. She recognized Condor's voice at once, as he plunged at once into a desperate plea for her to reconsider her decision. She told him her answer was final. In her turn, she pleaded with him to see reason and behave like a rational being. And then he had made an extraordinary proposal. He had told her he was getting old—which she knew. He added that he knew, as a doctor, he had not much longer to live, and he knew precisely what to do and what not to do to ensure that his life was not unduly prolonged. He was sure to die in three years, perhaps two. Wouldn't she marry him just for that short time and make what little of life was left to him a time of complete

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happiness? And afterwards she would be free to marry whom she liked.

The only effect this fantastic proposal had on her was to suggest that he had gone completely mad. She repeated her refusal. Very clearly he had repeated his proposal, telling her it was for the very last time. Once more she had said no. Then she had heard what seemed to be a shot, and his voice was still. In panic, she rang the police, who reached Condor's apartment so quickly that when they arrived the telephone was still swinging at the end of its cord.

On the floor lay Dr. James Condor. By his side was a revolver of an antiquated type, from which one cartridge had been fired. His single bullet had been scientifically placed so that it had killed him outright. Even in committing suicide, it seemed, Condor was a perfectionist.

Propped against the telephone base was a note addressed to Mrs. Condor. It was typical of the man who wrote it, simple and forthright. He asked for forgiveness for all the pain and sorrow he had caused, and hoped that she and the children would bear him no grudge. And he asked, too, that they should not blame Yvonne; all the wrong had been his. That was all. For Yvonne, too, was a letter, also asking forgiveness and saying that Fate could not be diverted from its course. Without Yvonne, he said, his life was worthless and was better ended. He reavowed his love in terms of simple dignity. There was, too, his will, which left everything to his family after a considerable sum of money had been paid to Yvonne.

In that tragic and rather sordid way ended the career of a fine surgeon, a brilliant mind, a noble spirit, and a faithful friend, whose only sin was that his vast capacity for love was temporarily diverted into a dangerous channel. It was inevitable that the newspapers should recall the story of Pygmalion. But Condor was greater than Pygmalion who, falling in love with an ivory statue he had made, had to appeal to Aphrodite to bring it to

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life. Condor worked in skin and tissue and bone, and it was he himself who gave a new and better life to the beauty he had himself created. And for that he gave all, even at last his life.

To say that I was shocked and miserable is an understatement. I felt as though the world had suddenly come to an end. His loss was irreparable, and he was the friend to me that one man is lucky enough to meet once in a lifetime. To all, he gave generously what he had to give; to me he gave perhaps a little more, and for that there will always be gratitude and remembrance in my inmost heart. I was not alone in my grief. The whole hospital mourned, patients and staff alike, for something luminous and inspiring had been taken from them.

Somehow or other I struggled through that black Sunday. The police came, questioned me, and came again, but I could tell them little. At last I went to bed, worn out but unable to sleep. Just when it seemed to me I had managed to doze, I was awakened. The Administrator wanted to see me. It was six o'clock in the morning.

The Administrator was profoundly worried. There would be patients in the Plastic Surgery Department for dressing and post-operative treatment. Of course all operations booked would have to be cancelled. But could I manage to do the routine? I said I thought so. He nodded. But I would have to have a house-surgeon with me to satisfy the law . . . even under the shadow of that great loss, I was not allowed to forget that.

I shall never forget the sight that department presented when I entered it. The waiting-room was crowded with patients, all of whom had, of course, heard the news, which had received a further sensational write-up in that morning's papers and had been featured on the radio. Every one of those people was standing in respect to the man who had died and whom they had loved. And every one was in tears, men and women alike. It was the finest tribute that any surgeon could have on his death.

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Somehow or other I managed to attend to these patients, the house-surgeon by my side. I could not fail my friend and teacher. But though I used all my skill and knowledge, I felt that I was inadequate. It was not simply that I had not Condor's exquisite touch and delicacy. I was not Condor, and all these people looked upon him as something not far short of a god.

That month of October, which had begun for me so brilliantly, ended in the gloom of the pit. I did not even trouble to speculate about the future. There were conferences in the hospital. I was called into the administrative offices, and there I received a hint so plain as to amount to a promise, that when my internship was over, I could have Condor's position as head of the department. But even that proposal failed to cheer me. It was a contingency in a still remote and, to me, shapeless future. Meanwhile the department was to be closed and no new appointment made. Even the hospital management realized that while Condor's memory was so fresh, the department could be no more than a ghost.

And I was haunted by Condor's story. I began to see in it allegories and metaphysical meanings, the workings of that Fate which he himself had invoked in his farewell letter to Yvonne. The newspapers had likened him to Pygmalion, but I now found myself comparing him to Icarus, who, building himself wings of wax and feathers, flew up to challenge the Sun—till the wax melted and he was cast to his death. Just so Condor had challenged Nature and been enmeshed in his own toils. At moments I was inclined to abandon plastic surgery altogether and to think that those stern religious people who hold that it is blasphemous to interfere with the designs of God have some right on their side.

But these were only passing fantasies. In my heart I knew that what Condor would have liked me most to do would be to carry on, with such ability as I possess, the things I had learnt from him and we had discussed so

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often. Surgeons die, he would have said, surgery goes on, and it is surgery that must be remembered. That is true. Yet there are some surgeons whose memory should be kept always green, and he is one of them, for his was a life that has a lesson for everyone. Some day the story of that life should be written, and if no better skill is available, there is no task to which I would more gladly turn my hand.

November

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Only two months remained of my year at large, and the time was fast approaching—if, indeed, it had not already arrived—when I must take serious thought for the future. In one respect my original plan of spending twelve months fancy-free and footloose had miscarried. Here in California I had accepted a position to which I was nominally bound for a year, of which three months only had passed; but there was nothing binding about that obligation; if I wanted to go elsewhere I was free to do so at short notice.

Recent events had completely unsettled me, and I was in no frame of mind for decisions. I was unable to escape from the feeling of futility that Condor's horrible end had raised in me. His memory haunted me. But it was not the memory I should like to have had of him—as the great surgeon and perfect friend whose mind, at nearly seventy, was more alert, questing, and original than that of most men at fifty. No; it seemed that that picture of him belonged to a dim and remote past though, in fact, he had been like that only a month earlier. The figure my brain conjured up now was that of the broken, quivering, helpless old man, who held in his hand the letter that had shattered his romantic, illusory dreams.

With such a vision constantly recurring to me, I found myself in a state of vacillation such as I had never known before. At times it frightened me; at others it numbed all my powers of thought. I began to shrink from personal

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relations, believing that they held nothing but disillusion and danger—and when a man comes to that he is in evil case indeed.

At one moment I was filled with no desire but to flee with the utmost speed from California and return to England, to an environment that was familiar and, if not entirely friendly, at least unhostile. And then abruptly my mood would change. I would remember the circle of acquaintances in London to whom I should have to be polite, the dull obligatory round that life there would again impose on me. Curiously one other and really trivial consideration always entered into this phase of my distraction: I would recall London on a typical November day, its leafless plane trees dripping damp, a light, grey fog eddying about their trunks, a general drabness that was the very antithesis of the brightness and warmth of the Californian scene.

From England, too, letters reached me. My wife, not at all unnaturally, was growing anxious about what plans she should make for the future. If I was going to stay on in California, then it was no more than common sense that she should join me soon. There were the children to consider. If they were to live in America, then it was better that they should begin their acclimatization to American conditions as early as possible so as to ensure that they should not be uprooted at a critical phase of their education. The more I strove to think clearly, the more the problems seemed to multiply.

By degrees, however, I managed to attain a more settled outlook. These ups and downs, these violent swings from one view to another, were no more than exaggerated emotional reactions to the stunning shock of Condor's tragic death. I forced myself to remember that if I was going to allow myself to be swayed and controlled by every passing whim I might just as well give up hope altogether; an indecisive man of that kind has no right to consider himself a surgeon.

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I had set out on this grace year—though it had by no means been an idle one—for the purpose of regaining my physical health and defeating a serious threat of incapacity and perhaps sudden death. In that I had succeeded completely. Since I had been in California I had had a number of thorough physical examinations, carried out by doctors who were not only to be numbered among the best in the world but also had at their disposal every modern device for examining and assessing the human body. Their reports had been unanimous: all danger was over; my heart was perfectly healthy again; and I was, in fact, probably fitter now than I had been for some years past. What, I asked myself, was the good of that if now I was sinking into a state that was likely to threaten not my physical but my mental health. To put it quite bluntly, I was behaving at times like a lunatic.

So I brought myself to consider the alternatives in a more realistic light that frightened away the ghosts. Here in California there were undoubted rich opportunities for me if I cared to use them. If I cared to qualify and to behave like a reasonable being, I had a heavily odds-on chance of taking over Condor's old position when the Department of Plastic Surgery was reopened. That should have been sufficient to set any man's doubts at rest. But it was not all. There would be ample scope for private practice—and I knew, from first-hand experience, what that might mean. It would have been presumptuous to suppose that I could rise to the heights that Condor's genius had enabled him to reach, but even if I earned no more than half his income I should still be better off than I was ever likely to be elsewhere in the world. Materially and financially, there was every reason why I should remain in California, none why I should throw away the chances that it offered.

Even these cogent arguments failed to convince me. There are other things in life than money—and no-one has to be in the United States long to see with his own eyes

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that money by itself, wealth even, cannot ensure happiness; indeed often it seems the enemy of contentment and peace of mind. Could I visualize spending the rest of my life in America as an American citizen, accepting all that astonishing mixture of good, bad, indifferent, and outright fantastic, which is known as the 'American way of life?' Nor was there only myself to consider. I had a wife and family whose welfare was more important than my own. Would their future interests best be served here in the United States?

That was the crucial question—and I saw that it was one that I had no right to decide for myself. Indeed, so far as the family was concerned, my wife's views should be decisive. It was that which brought me to my first decision. She must have the experience on which to form an opinion, and that she could gain only here in California. I had still two months to the end of my own private year at large, nine to the end of my internship. Even in the shorter period, she should have time to come to a conclusion.

So I cabled to her to come over. No sooner had I sent it than my doubts and misgivings returned with overwhelming force—and I cabled again, cancelling the arrangement. Indecision again mastered me. I was afraid not so much of coming to a wrong decision as of making a decision at all. I felt I could commit myself to nothing. In the first fortnight of November, I changed my mind at least ten times, now telling my wife to join me, now telling her to remain in England, till she must have been reduced to a state bordering on despair of my sanity. My last cable was that she should come, I resisted the subsequent impulse to cancel it. Her presence alone should enable me to take a grip on myself.

A few days later, I met my wife and our youngest child at the airport. The two elder children were still at boarding-school, where each would remain till the commencement of the Christmas holidays in December, by which

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time a firm decision might have been reached. It is evidence of the state to which I had brought my wife that she seemed a little incredulous at being with me; right up to the moment of emplaning, she told me, she had expected to receive a cable telling her not to come.

The very fact of her being with me calmed me, and the next few days should have added to the reasons why I ought to remain in California. Friends at the hospital had found a house for us, a notable feat, since America has its housing problem no less than England. And those same friends and others did everything possible to welcome my wife and put her at ease in unfamiliar living conditions. This was a fine demonstration of that good-neighbourliness which is so marked an American trait, and it was, logically, impossible to see why anyone should have doubts about being happy in the permanent association of people among whom such a spirit of friendliness prevailed. It seemed that, like the young cadet, I was inclined to regard everyone as out of step but myself.

It did not take me long to realize that I should never have sent those telegrams of cancellation. The mere presence of my wife and a settled domestic background brought a welcome stability to my mind. Even though we agreed to defer final decision for a little while so that she could form her own, independent opinions, I knew that when the time came I should be able to face problems more squarely than I had recently; and I was once more in the mood to take a keen interest in my life at the hospital—a life that had appeared drab and pointless since Condor's death.

Work there had, in fact, continued uneventfully. When the plastic-surgery department was closed, I went back to the general duties of an intern, doing everything that I was called upon to do without much enthusiasm, though not, I think, inefficiently. Whatever my state of mind had been, however, there was little in which I might have

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taken any real interest. The hours were long and exacting, but it was all routine—and that perhaps was as well, for I do not think that in that black first fortnight of November I would have been capable of undertaking anything that made serious demands on skill and knowledge.

Soon after my wife's arrival, however, I was assigned as an intern to the Department of General Surgery. In view of what I have said earlier about American specialization and the almost complete disappearance of the general surgeon in the United States, the existence of such a department may seem to need a little explanation from me. Actually, its name does not carry the connotation that it would in England. It is rather that section where all surgeons operate who have not a department of their own. Some of the operations carried out there were, in fact, among the most highly specialized I have ever witnessed, and it was these which turned out to be the most memorable experiences of a month that began so overshadowed with personal problems and doubts.

Although at various times I was called upon to assist almost every one of the many surgeons who operated in the department, I found myself attached principally to two. This proved to be a piece of the greatest luck, for they were men of outstanding skill and daring, and in the interest of working with them I was able to forget most of my worries. Both were young, and I gained quite a lot of quiet amusement when I was assisting them in the humblest capacity from remembering that each was considerably younger than myself. But they had the skill and confidence which, in other countries, is almost always regarded as the prerogative of considerably older men, and they revealed to the full the outstanding characteristics of American surgery—originality, superb courage, and a refusal to admit that anything is impossible.

Nothing showed this more than one of the earliest cases in which I assisted the younger of these two surgeons, whom I shall call Dr. Poole. The patient was suffering

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from cancer of the lower oesophagus, which almost every surgeon I had ever known would have regarded as hopeless from the moment the final diagnosis had been confirmed. The oesophagus is the tube that conveys food from the pharynx—the 'swallow' in the throat—to the stomach, and it needs no special surgical or physiological knowledge to realize how terrible any damage to this vital structure must be. A cancerous growth in it leads inevitably to a horrible death by starvation, for in the end the tube becomes completely closed, and the body is shut off from any supply of food. It is true that the sufferer can be kept alive by a special form of artificial feeding, but this does no more than delay the end. This condition, with its intense suffering and invariably fatal outcome, has provided those who support euthanasia with some of their strongest arguments, and it does indeed seem a grim and inhuman farce to seek to maintain life in one condemned by it to a certain and painful end.

That, at least, is the accepted picture of the condition. But Dr. Poole obviously did not accept this view. Nor was his attitude, as he made his plans, that of the young, over-enthusiastic surgeon ready to try a desperate chance where all is to be gained and nothing lost. On the contrary, he had the air of a man faced, it is true, with a serious problem and heavy task, but confident that there is nothing beyond his capabilities. This was particularly noticeable in the preparations for the actual operation. Poole was calm, collected, and perfectly sure both of what he proposed to do and of his ability to do it. The atmosphere was, in fact, similar to that which precedes most normal operations; no-one with experience would have believed that something quite out of the ordinary was afoot. That in itself was remarkable, for usually on occasions when a hopeless case is to be dealt with the experienced eye can detect in the surgeon one of two attitudes: either he looks on it as a mere formality almost in the nature of a *placebo*, or he is a man who hopes

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against hope and experience that a miracle will occur. Of neither could I notice even a suggestion.

Perhaps because I was so interested to see what this confident young man intended to do, I was the most eager person there, and my anticipation that I was to witness something quite extraordinary was fulfilled completely. It was quite clear from the outset that no ordinary abdominal intervention was proposed, for the patient was put under what is known as positive-pressure anaesthesia, which gave me a clue to one detail of the procedure: the thorax, or chest region, was to be opened. It was the introduction of positive-pressure anaesthesia that made extensive surgery of the chest possible, for without it the lungs collapse owing to the entry of air into the chest cavity. If, however, the anaesthetic gas is introduced into the lungs at a higher pressure than that of the atmosphere, the lung can be maintained at its normal size—or at any size desired. This operation was to show a very brilliant application of this principle.

Actually the incision was made in the back, behind the lungs, a method of approach to the internal organs known to surgeons as the transthoracic route. Carefully, but with the utmost confidence, Poole exposed the whole of the oesophagus; and it was here that the skilful aid of the anaesthetist was invoked. For as the surgeon made his approach in the neighbourhood of the lungs, so the anaesthetist lowered the pressure of the gas, and the lungs shrank to an almost incredibly small size. In this way the lungs were protected from possible injury and the surgeon was provided with more room for manoeuvre.

Now, as coolly as if he were removing an appendix, Poole proceeded to excise the whole of the oesophagus. Obviously this was the only possible treatment of the structure, for it had been cancerous for between two and three years. But a body without a gullet is certainly less well off even than one with a cancerous oesophagus, and the remedy would seem at first sight to be more drastic



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than the disease. But it is here that the truly dramatic stage of this operation is reached. }

The surgeon turned his attention now to the stomach itself. With the utmost skill he severed the various ligaments that hold that organ in its normal position so that it became free. Then he sutured the stomach to the free stump of the oesophagus which had been left in the thoracic region. This procedure has to be seen to be believed; it is one of those things which, on a first demonstration, make a surgeon catch his breath with surprise and admiration. I am sure I did so—but if I did not, it certainly did not imply that I was neither surprised nor admiring. It is a manoeuvre that calls for something more than the highest surgical competence; it demands, in fact, the touch of the artist and master-craftsman combined.

So the concluding stages of closing the incision were reached. The anaesthetist reinflated the lungs, which resumed their normal size and shape, and the wound was carefully sutured after every modern precaution against post-operative infection had been taken. The whole operation had lasted five hours, though to me, with little to do but watch in absorbed admiration, it had barely seemed as long. During the whole of that time, the patient had been kept under continuous blood transfusion, something like eight pints being introduced into him during the period.

This was certainly one of the most brilliant demonstrations of surgical dexterity I had ever seen, and it reflected the highest credit not only on the surgeon but also on the anaesthetist who had so skilfully co-operated, and on the first assistant who had been virtually another pair of hands for the surgeon, for they had seemed to be controlled by his brain rather than another's. But (as my memories of the incredible Tom reminded me) surgery is not simply brilliant technique, which is, or should be, only the means to an end: the patient's recovery. It was difficult to believe that so drastic an intervention as this,

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ending in, so to speak, a fundamental rearrangement of the internal organs, could have anything but a fatal issue. There were surely limits to the powers of human recovery. This case seemed particularly hopeless, for the patient had been seriously ill for a long time.

The actual outcome was hardly less astonishing than the operation itself. Naturally the patient was ill, as anyone would be, even the strongest, after so serious and prolonged an operation. But he was no more and no less ill than any other surgical case of a comparable kind. Recovery was slow but steady, and when he was finally discharged he seemed likely to survive for a considerable time. True, no insurance office would have accepted him as a first-class risk, but he had been freed from the threat of painful death by cancer, and that by one of the most astonishing pieces of surgery I had ever seen.

If I have made it appear that this spectacular treatment for cancer of the oesophagus is a uniquely American method, I know I am being unfair to my British colleagues. The operation has, in fact, been performed in this country, and successfully. But it is in America that it has been perfected and come to be accepted as a normal procedure rather than as a desperate resort. This was the first time I had seen it carried out, and nothing impressed me more than Poole's attitude of confident relaxation. And that, no doubt, has a lot to do with his continued success, for I learnt later, when I had an opportunity of talking to him, that he had performed over one hundred of these operations with a fatality rate lower than that even of certain operations that no surgeon would hesitate to undertake.

The other surgeon whom I assisted was Dr. Milton, a specialist in heart and vascular surgery. This is a field in which America is unquestionably supreme. Dr. Blalock's operation that has saved hundreds of 'blue babies' has been familiarized to everyone by popular accounts, and I have related in an earlier chapter how American surgeons are now entering into the very interior of the heart itself.

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In America itself, Californian surgeons are the acknowledged leaders of heart and vascular surgery, and, as I was soon to see with my own eyes, Dr. Milton was one of its most brilliant exponents.

The case of his that I recall most clearly, partly, no doubt, because it was the first at which I assisted, and partly for its own inherent interest, was that of a woman in whom an aneurysm of the aorta had been diagnosed. An aneurysm is, roughly, a dilatation due to a spot of weakness in the walls of an artery, and it is an immediate threat to life, particularly when it occurs, as it does frequently, in the aorta, which is the principal trunk vessel carrying fresh blood outwards from the heart. Like a weak place in a bicycle tyre, it will burst if the pressure in the tube increases—and the blood simply pours out into the internal cavities of the body. Many cases of sudden death after shock or violent exertion, both of which cause the heart to pump more vigorously, are due to burst aneurysm, which has probably remained unsuspected. On the other hand, the loss may be more gradual, like a slow leak in a pneumatic tyre, and then life simply ebbs away in two or three days.

I knew, of course, that it was possible to operate on the major blood vessels. I had even seen such operations performed. So I approached this operation in a rather less expectant mood than had possessed me when I had attended Poole's demonstration. But when the aorta was exposed, I could not suppress the grave doubts that rose in me. The aorta is the largest artery in the whole body—the main-line trunk of the circulation—and because it communicates with the heart, the blood there is at its highest pressure. The aneurysm that was now revealed was enormous. It swelled out from the surface of the artery to the size of a tennis-ball, and it seemed quite impossible that anything could be done for it. Here, I felt, was a case in which the surgeon had underestimated the extent of the damage and committed himself to a hopeless intervention.

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Such cases are always happening, since, despite all the wonderful diagnostic aids now available, the surgeon can never be quite sure of the exact nature of the condition with which he has to deal until he has opened up the site.

But Milton appeared quite unperturbed. He went on with calm confidence as though this was no more than he had expected and he had prepared for it. For his next move was quite dramatic. Having tied off the aorta, he proceeded to resect a piece of it no less than eight inches in length. Then, in the same completely controlled way, he introduced a small length of fabricated tubing to bridge the gap, covered it with tissue and sutured everything into position. Finally the abdomen was closed and the patient wheeled away.

I had, I decided, seen another wonder—I no longer called such things miracles; but I retained my right to doubt. For two days the patient was kept under heavy blood transfusion, no less than sixteen pints being introduced in the forty-eight hours. By that time, it was clear that she had taken the first steps to recovery. In due course she was discharged, no longer carrying with her a menace to her life.

It is a curious fact, particularly impressive to a plastic surgeon, that no trouble has arisen from the artificial tubes thus introduced into the blood vessels in operations of this kind. In plastic surgery, it is a fundamental principle that the only grafts, whether of skin, or fat, or bone, that will survive for more than a very limited period are those taken from the person who is being treated—autografts as they are called. The only possible exception to this rule (apart from the still debated case of identical twins) is that in very rare circumstances repairs carried out with some metals, of which tantalum is one, appear to be successful—it has to be put as cautiously as that! But the special material of which these tubes used by the vascular surgeon are made has not, in all the operations that have been performed, given any indication that it initiates any of those

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processes which lead to the final rejection of foreign substances by the body.

Not always, however, are these tubes used, for where pieces of aorta taken from cadavers are available, they can be inserted with equal success. This, too, is contrary to the experience of plastic surgeons, who abjure taking material, living or non-living, from any source but the operated person himself. The only homografts, as material from other human sources is called, that have proved successful are the corneas grafted on to the eye—but that is a very special case indeed. Nevertheless it is clear that we still have a great deal to learn about the tolerance and intolerance of the human body to foreign bodies.

When smaller blood vessels have to be repaired, the material is, in fact, usually provided by the patient himself. There are many small veins in the body that can be removed without harm, since the circulation rapidly establishes itself by other channels and the health is completely unaffected. The surgeon makes use of such small veins for the minor repairs, and the success he attains is, therefore, rather less astonishing. Indeed, this kind of vascular surgery might well be called internal plastic surgery.

While I was working by the vascular surgeons at the hospital, I had one experience that I particularly recall, not because it concerned anything spectacular or even abnormal, but because it had a special personal interest for me. Its subject was, in fact, the very ordinary one of varicose veins, hundreds of which are probably treated daily by surgeons all over the world.

Forty years ago or so, there was only one treatment for this distressing condition, and it involved stripping out the affected veins. It was not a very popular operation either with patients or with surgeons, and it is not perhaps surprising that patients preferred to do their best with heavy elastic stockings and the like—or that promoters of quack remedies found varicose veins a rich field to cultivate, for

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it is only when orthodox treatments are relatively ineffective that the quack gets his chance.

Then came various injection treatments, in which substances were inserted into the veins, these becoming blocked when the injected material hardened to form a kind of dam. Other cases were dealt with by making a small incision and tying up the affected vein thus made accessible. With the adoption of these methods, which were generally successful in cases that were not too far advanced, the older operation was abandoned. Up to about five years ago, in fact, no surgeon would have thought of using the old procedure of stripping out, and it was dismissed in textbooks and papers on the subject as 'drastic, useless, and dangerous'.

The aim of these newer treatments was to seal off the veins and cause the blood flow to take other channels—a process I have just mentioned in another connection. From that point of view they had a great deal in their favour. But, though they prevented the further development of trouble and eventual rupture, they had one very serious drawback. Aesthetically, they left the leg precisely as it had been before. If ugly, discoloured patches had formed, then those disfigurements remained.

As a plastic surgeon, I was interested in this problem, and I asked myself whether it might not be possible to devise some means of solving it. As a result I came to the conclusion that both the aesthetic and strictly surgical requirements could be met by a revival of the old discredited operation, but with an improved technique made possible by the general progress of surgery. I was able to test my ideas on several cases in my practice, and the results were highly satisfactory.

Fortified by my investigations and their outcome, I wrote a paper advocating a return to an improved form of the older operation, and it was published some time ago. For the most part, it attracted no attention, and the only comment on it that reached me was a wholesale condemnation

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of my views as a return to an utterly discredited form of treatment for which nothing could be said. I had to console myself as best I could with the thought that it was not the first time in medical history that established prejudice and preconceived ideas had prevented the consideration of carefully authenticated facts on their merits—and that other, and greater, men than I had been the victims. It was not that my conclusions failed to win approval that, I admit, annoyed me, but that they were dismissed without argument and with sweeping statements which were not backed by evidence that rebutted my contentions. However, I swallowed my pride and tried to forget the affair.

I had, in fact, so far succeeded in forgetting it that it did not return to my memory when I was warned to assist at an operation for varicose veins. This surprised me, for as a rule, with the injection or ligaturing procedures, assistance is not required. But in America there is a tendency sometimes to over-elaboration, and no doubt this was an expression of it. To my astonishment I discovered not only that the method to be employed was a modern version of the old stripping operation, but that that procedure had been the method of choice, followed even in minor cases, here and throughout America for the past two years, its advantages having been demonstrated by the surgeons of the famous Mayo Clinic.

It was a strange experience for me to find my views confirmed here in the home of advanced surgery, thousands of miles from the place where I had put them forward, and my interest was so aroused that I undertook a search in the library to compare dates and find out the whole truth of the matter. The librarian helped me in every possible way, and it seemed, beyond doubt, that my paper, which had been ignored or dismissed, was actually the first to recommend a return to a modification of the older operation. I felt as though I ought to assume a halo and step into the honourable company of ignored and martyred pioneers!

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A little while afterwards I had an opportunity of discussing it with one of the leading vascular surgeons of America who was visiting the city. I showed him a copy of my original paper and invited his comments. He smiled a little crookedly when he returned it to me and pointed out that it often happened that way, for there could be no doubt of my priority. He himself had no doubts about the advantages of the operation, and I could derive what solace I might from that and its adoption by almost every surgeon of standing in the United States.

That was a curious affair, though not perhaps of any great importance except as indicating how powerful prejudice can be even in a sphere in which unbiased scientific truth is supposed to be the only guide. And at any rate I could claim to be the only intern in America whose views had been confirmed by the country's leading surgeons.

This work in the general-surgery department together with the presence of my wife had done much to restore my mind to an even keel, and when, towards the end of the month, I came to reconsider the problem of the future, it seemed much less forbidding and obscure. In fact, there seemed only one possible course to take. One third of my compulsory internship was gone. Beyond that the prospects were alluring and such as no man in his senses (as I now claimed to be once more) could neglect.

One picture that I had conjured up in my days of doubt did, however, return to me: the picture of London in a November fog. As I sat in the garden of our rented house, that vision was utterly forbidding. Spring seemed to be all about me, though Christmas was less than a month away. Over the hills in the distance, the sky was serenely blue and cloudless. This was a paradise which only a man who, like Adam, had completely fallen from grace, could think of leaving.

I went to the telephone and dictated a cable to friends in London. According to the arrangement that had already been made, they were to collect my two elder children from



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their schools and see them on to the plane for New York where I would meet them. I saw the Administrator and obtained a few days' leave to carry out my part of the scheme.

It was a decisive step, but not quite the final one. There was still a month to run to complete my year at large, and in my own mind at least I was still free. I owed it to myself and my New Year's resolution to be so.

## December

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When I had sat in my garden, rejoicing in the soft warmth of the Californian air, and deciding to send for my children, I had not expected that I should so soon be forcibly reminded how wonderful a paradise is the south-west coast. I emplaned with no other thought than that in a very short time I should have the whole of my family gathered together, and that we should do all we could to make our first united Christmas in America one of the most memorable of our lives, and the pattern for the many others that were to follow. This comfortable, peaceful frame of mind persisted as the airliner flew rapidly eastwards. I barely troubled to look out of the windows. The journey was of no more interest to me than a bus ride is to a Londoner, and I took for granted that it would be as uneventful.

Then, as though to wake me from my day dreams, the plane began to buck and pitch. The whole world seemed to have plunged into darkness. I could not look out of the windows, for they were frosted over. Alarm seized me, and I was not the only one to be apprehensive. But the efficient stewardess reassured us. We were over Chicago and were going to make a landing at the airfield. There was nothing at all to worry about . . . nothing, indeed, as I commented inwardly, but the fact that I have my two children to meet and no time to spare.

The stewardess had said we were putting down in Chicago, but as I stepped from the aeroplane it seemed to

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me that the pilot had flown right off course and made landfall in northern Siberia. The snow swirled round so thickly that the visibility was nil, and I almost lost my way in the few yards between our landing point on the tarmac and the airport building. The wind blew with a keenness I had not experienced since, as a child, I had known the Russian winter at its worst. It seemed incredible that, only a very few hours ago, I had boarded this airliner—now lost to sight in the blizzard—and, warmed by a friendly sun, had allowed myself to indulge in pleasant, careless thoughts. Perhaps this was just retribution for forgetting the realities of life.

Chicago is a city that has the reputation of doing everything in a big way from crime to meat packing—though some of my dietetic friends might say the two things were the same. Without doubt, the city had produced something quite unusual in the way of snowstorms. Drifts piled up as the day wore on, and it seemed we must be marooned there for ever, and in some places reached a depth of eight feet in a few hours. The wind had a razor-like edge to it, so that even the centrally heated waiting room and restaurant were cold with draughts. It was almost too cold and miserable to talk, though one of the plane's passengers insisted on telling those who cared to listen that this was nothing to the blizzard he'd known here when he was a kid, and Al Capone had been practically city boss . . . and if we thought Chicago couldn't be hot, we should get around the little old burg in summer some time. Till we'd known a Chicago heatwave, we just didn't know the first thing about heat. . . . In that, I believe, he is right. Chicago is not a health resort, either literally or in the slang sense. For myself I have no wish to see it again in any circumstances whatsoever.

The tale of wasted hours mounted, and I grew more and more depressed. I took no notice of my surroundings at all until the never-ceasing blare of the radio began to belch forth the news in that tone of hysterical excitement that

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tries to make a major sensation out of a news item about a lost dog. This announcer was talking about the storms that were sweeping the whole of the continent and reaching far out over the Atlantic. . . . Europe was frozen up. . . . A British airplane on the westward crossing had been forced to alter course to avoid the storm centre and had force-landed in Greenland. . . .

I felt a sudden tightness round my throat and made a calculation. It could be—it must be—the airliner bearing Alexandra and Peter. My children! In Greenland in a blizzard! I felt sick and turned my head. The cold trickle down my spine owed nothing to the Arctic outside the building.

The pilot of our aeroplane came into the room, as he had from time to time, no doubt to show us we were not forgotten, and I signed to him. He strolled across in a leisurely way.

'Yeah, doc?' he said, his ruminant jaws adjusting the gum to a conversational position inside his cheek.

I told him what I believed had happened and how anxious I was to get on to New York. He looked sympathetic at my news but shrugged all the same.

'Nothing I can do about it, doc. Maybe we're grounded here till this lot blows itself out—days, could be. I'm just as anxious not to stick around this dump as you are, doc. We'll be pulling right out the moment we have the okay.'

I realized he had no intention of being either unsympathetic or obstructive, but nevertheless I had a sudden desire to punch his head. But I managed to contain my anger. Two minutes later I was in the office.

Here there was a greater show of sympathy—and efficiency. There was some sign of a break in the storm, though the meteorological report was still rather doubtful. Even so, it would be a long time before sufficient runway could be cleared for the big liner on which I had booked to get away. There was a chance a smaller one might leave with the mail. . . . The clerk would inquire if there was a reservation.

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He played those mysterious games with a telephone switchboard that reservation clerks, whether in an airport in the United States or a theatre agency in London or, for all I know, a railway station in China, always play. But he had all the American's speed and willingness to help. If I would stand by ready to go at a moment's notice, a seat would be ready for me. The company wanted to have me know that it could accept no responsibility whatsoever. The risk must be carried by myself. But the something-or-other insurance of life was right there across the main gangway; they'd fix me an on-the-spot cover if I cared to ask them. . . .

I did not care. I looked about for the small bag that was all my luggage and placed myself in a prominent position near the door of the waiting-room where, though it was freezing cold, there was little chance of my being overlooked. Through the windows which a janitor busied himself with cleaning continuously, I could see the blizzard was lessening. I could make out dark, shadowy shapes that were aircraft on the runway. And then the snow stopped with such abruptness that it seemed a valve overhead must have been closed. I still recalled enough of my native Russia to know that heavy snowstorms often do stop like that.

A young man in airline uniform came up to me and asked me if I was the passenger for the mailplane. With beating heart I followed him and, stumbling in the snow, found myself being led to a small twin-engined aeroplane that inspired very little confidence in me. But it was my one chance of getting to New York, and it had to be taken.

When I climbed into the small, cramped cabin, the pilot, whose seat was actually in the cabin, grinned at me.

'Glad to have you ride with me, doc.,' he said. 'But don't expect service this trip. No stewardesses to keep your eyes busy this time.' He made an expressive gesture and whistled. 'The only thing you got to have with you this trip is your prayer-book. Could be you'll need it.'

He grinned again and absorbed himself in the business of preparing for take-off. Half an hour later the aeroplane

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bumped across the small space that had been cleared of snow for her. She just cleared the bank that the snow-plough had thrown up at the end of the space. I sighed with relief. I was on my way. I should get to New York somehow. As I settled down as comfortably as I could in the hard seat, I glanced at my watch. It was exactly twelve hours since I had landed in Chicago—twelve hours irretrievably lost.

Once again I made a mental calculation—a type of exercise for which I have neither aptitude nor liking. I came to the conclusion that if the plane from England was on time I must be too late to meet her. But if, as I still believed, she had landed in Greenland, then I might be in New York a month. I grew more and more impatient with every minute, but the small plane droned on steadily; and as we progressed the sky grew clearer and, to my astonishment, when we touched at La Guardia Airport the sun was shining. I took it as a happy omen.

My original plan had been to spend a day in New York resting before meeting the children, and then, when they arrived, to show them some of the sights before taking them to California. The whole of that programme had to be abandoned. I had not the faintest idea when they were due. I leapt into a taxi and told the driver to make all speed to the International Airport. He nodded and, as all New York taxi-drivers do, he chatted with me throughout the journey. When I told him of my anxieties and about my children, he looked round at me with a mournful air—and accelerated still more from the breakneck speed he had been threading the rear blocks where there was little traffic.

‘Geel!’ he whistled. ‘The kids! That’s tough.’

I doubt very much whether the distance from La Guardia to International has ever been covered by a taxi in a shorter time. When I handed him the fare and a tip, he handed the latter back.

‘Aw, no, mister!’ he drawled. ‘It’s for the kids, see?’

I had unintentionally found his vulnerable spot—a love

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of children and a sentimental concern for them, which is perhaps almost overdone in America. And I reflected that taxi-drivers are the same the world over if you can find that spot, despite their tough exteriors. The same thing has happened to me in London, especially in the war, and even in Paris, where taximen have the reputation of being brigands who would not be tolerated even in Corsica. . . .

Without losing a moment I rushed into the office and made my inquiries. I imagine I was not the first one to be interested in the missing plane, which, it turned out, was indeed the one on which Alexandra and Peter were traveling. I had come just in time, for it was due in half an hour's time . . . and there was no need for worry at all. Nothing more had been involved than a slight delay to take on fuel to replace that lost in fighting the Atlantic gale. The pilot had reported by radio that everyone was fit and happy 'including the two children'—by which I imagined mine were meant. They would be very proud to hear that they had figured in a radio report.

That half hour seemed endless—longer even than the twelve-hour wait at Chicago, but at last I saw the big Constellation circling the airport and heard the loudspeaker giving details to those who were waiting to meet arrivals. 'B.O.A.C. ship from London.' For some quite inexplicable reason I felt a sudden wave of nostalgia.

My imagination had been running a little wild during the wait. I think I had expected to greet two rather frightened children, careworn after a time of hardship in Greenland's ice and snow; but it was two very excited children, two children very full of their own adventures and the wonderful time they had had on the trip, when every passenger had made a fuss of them, who ran towards me. In fact, Alexandra confided to me—she ~~was~~ then eleven—if it hadn't been for the storm and being forced to land in Greenland, they might have been rather bored. Peter, too, had his complaint—that on Greenland he had seen no polar bears. A certain major had been a

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fellow-passenger and had had a large-bore sporting gun with him, and Peter would dearly have loved to try it.

There were other and more pressing matters to attend to than the possible boredom of Atlantic air-crossings and the unexplained absence of polar bears at an American Air Force station in Greenland. My timetable had been badly upset, and I had all too little time left to return without over-staying my leave. I had no wish to put myself in bad odour at the hospital, and still less to have any disciplinary action taken against me, as I might have being only an intern. I summed the children up as they did their level best with the strange and rather sickly American food they were eating. Neither looked tired. I asked them if they were ready to start within a few hours for California or would they prefer to rest.

The answer was a chorused 'Yes', and Peter, with the aggrieved surliness of a nine-year-old, muttered darkly about people who felt tired. So once again I made the taxi journey between International Airport and La Guardia, where the services for the south-west coast are based; and once again the taxi-driver—to the children's complete delight—kept up a running commentary the whole way. I can well understand why, a little time ago, when London taxicabs were tried out in New York (and incidentally met with great praise), the first alteration made to them was the removal of the glass panel between driver and passengers.

We had two hours to wait for the next plane to California, and we went into the airport rest-rooms. The children's excitement was wearing off a little now, and I was glad to see that both of them dozed a little, though it rather destroyed Peter's right to be contemptuous of tired people. Our plane was called a little later and we went aboard.

The weather had cleared miraculously, and our course lay along a more southerly route, giving inhospitable Chicago, which I shall always recall with a shudder, a

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wide berth. There was one stop on the way, and Alexandra was thrilled to discover it was Oklahoma. She had seen the musical comedy of that name when it had been having its record-breaking run in London, but she was a little disappointed, I think, to find so little resemblance to the stage presentation.

So we came, in what seemed a few minutes compared with my eventful outward journey, to California, and my wife, warned in advance by telegram, was there to meet us. I will say nothing of the joys of that meeting. Family reunions are exciting and memorable events to those who take part in them; to others, even close friends, they mean little.

Life seemed complete and worth living now. The tiring routine at the hospital was something to be borne cheerfully as the necessary prelude to a new phase of happiness. Christmas was near at hand, and already preparations were in progress everywhere. My mind and heart were as free of clouds as the blue Californian sky above.

And yet . . .

In a life that has had so little in it of the settled things that most men and women take for granted, I have learnt to be a little distrustful of what seems unalloyed happiness, just as the weatherwise upland shepherd has his doubts of the brilliant summer dawn. For him, those clear skies promise coming storms; for me, the carefree moment has all too often been the pause before my restless destiny strikes again. But I had nothing now to worry me. I was, I told myself, being absurd and pessimistic, and that was despicable at a time when my prospects, both professional and domestic, had never seemed more auspicious.

One by one the clouds, each no bigger than a man's hand, assembled. This time, the wind blew not from the professional quarter but from the social one. The arrival, first of my wife, and later of my family, inevitably threw the social side into greater prominence. Till then I had been to all intents and purposes a bachelor intern living in the hospital. Now I was a family man with his own house

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—and Americans take their social responsibilities very seriously. There were parties, visits, constant contacts with all sorts of people, and not simply meetings with my professional colleagues whose conversation rarely wandered far from 'shop'. Before, I had been living a cloistered existence, seeing only one very narrow sector of American life; but now my family and I became a part of the everyday round of the ordinary American citizen. New aspects of America were revealed; and what they showed was so strange and disquieting that I could not beat down my doubts. Nor were they made less by my realization that some, at least, were shared by my wife.

There was, for example, the problem of the children's schooling. We did not wish that that should be unnecessarily interrupted. But in America there is only one kind of school, to all intents and purposes: the State school. There are private schools, but only cranky people send their children there. And, of course, Americans do not believe in boarding schools; they like to have their children with them all the time, for the American is dedicated to his offspring.

I do not wish to criticize American education. I have not the slightest doubt it is adapted to the needs of America. But it is no criticism to say that it is entirely different from the system of England or of any European country. It may be that it is the type that will become universal as American influence comes more and more to dominate the Western world. It grades its children almost entirely by age and not, as in England, by ability. That was the first shock. For it meant that Alexandra would have nearly two years to wait before, educationally, American standards had caught up with her, and Peter would be similarly set back. For at all levels of American education the standard is lower than that of Europe and specially of England—until the stage of post-graduate professional and technical education is reached, when America leaves the rest of the world far behind. But the fact remains that in most things the English sixth-form schoolboy is at

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least the equal in most things of the American university student in perhaps his second or even his third year, and the discrepancy is maintained at all lower levels.

Moreover, the American child is encouraged in the spirit of self-sufficiency and aggression from the cradle. If he lags behind in learning, he is an adult, compared with his English contemporary, in knowledge of the world. I remember once at a party one of the most distinguished surgeons in the city was telling us about his son, aged nine; and he recounted with pride that his boy had earned no less than three hundred dollars in the past year, selling papers and acting as messenger for one of the city's newspapers. My wife was shocked; I felt at least uneasy. I do not say that the system is wrong. I have fought for my living myself and often wished that I had been, when a boy, better schooled in the arts of getting and holding a job and relying on myself. It may be that England, with its protective legislation for children, has gone too far to the other extreme. It is good that a boy should be able to stand on his own feet early in life. But—yes, but—it is, shall I say, a little odd to think of the nine-year-old son of a wealthy and successful surgeon earning money in the streets of a big city, exposed to every influence, good and bad, in it. Perhaps to find it odd will be described as snobbery, but I do not think so.

Right or wrong, these conditions faced us with problems. Did we want Alexandra and Peter—and, later, little Lisa—to be caught up in this system?

It was at another party that we had another shock. It was late, and we arranged for a baby-sitter to look after our children while we went. The baby-sitter is a feature of American life that has much to recommend it but one has to know whom one engages. Dozens of America's teen-age girls are willing to take on the job—and they are equally willing, while their employer of the night is away, to have in their friends and start a jive session. But that is beside the point.

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One guest, a colonel with quite a distinguished Army record, had failed to find such help, and he brought his child with him, a boy of about eight. It was a surprise to find this taken for granted, for we had not thought that late cocktail parties were ideal places for young children. Along one wall of the room was a buffet laid out with all that infinite variety of foods which the American hostess provides. At once that small boy explored it. From every dish and plate he abstracted sardines-on-toast and bore them off. Not one was left out of all that massive array. Yet his father laughed. The whole party laughed. It was just too 'cute'. An expression of the go-getting spirit, of knowing what you want and grabbing with both hands . . . I tried to imagine my boy Peter doing the same—and my reaction to it; the effort was impossible.

It was, I think, the newspapers that raised the final doubts in our minds and influenced the decision that we were to make. They have to be seen to be believed—and not merely seen once, but every day for a period, so that their savour may be appreciated. It has been said, with what truth I do not know, that statistically crime is little more prevalent in America than in England, but that it seems to be much more so because, whereas the English newspaper with its six or eight pages has to condense and report only the more striking items, the American newspaper with its sixty-four pages daily has to magnify every small peccadillo into a major crime. There is some truth in this (though I repeat I cannot vouch for the statistical statement), but on the other hand these huge newspapers do give a very full picture of American life in general—and even when one has made every possible allowance for exaggeration, distortion, and imagination, and for the insatiable craving of so many Americans for publicity at any cost, even public derision, that picture is not a very pretty one.

I can remember from this time cases, reported in every conceivable detail, that were published in the course of

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three or four successive days. There was the mother who beat her child to death because he interfered with her enjoyment of the television programme; there was the policeman who, on his off day, took his wife and two children in his car to a drive-in open-air cinema, a feature of current American life, where one sits in the car, eats, and watches a movie, and heard a shot, of which he took no notice—till it was discovered that his small son had shot his daughter through the head with the policeman's own gun, in imitation of the film he had been watching; and there was the boy of nine—Peter's age—who shot his mother dead because she reprimanded him when he played truant from school. Three cases in three days, each typical of many. And in two of them children were murderers, children who, presumably, would have attended the schools to which Alexandra and Peter might go. . . . No, it was not a nice thought.

For the time being those two were enjoying themselves hugely, being spoilt by everyone, and coming to believe that California was paradise itself. They talked every day of the Christmas and the treats it had in store. But we were worried and ill at ease. Perhaps we had been a little precipitate in bringing them over so soon; perhaps it would have been better to wait a little while till I had settled in more firmly; perhaps—perhaps—perhaps. . . . Doubts and indecision mastered me again—and my wife, too.

I waited then, as I have done so often in my life, for Fate to take charge. Whenever I have tried to organize my affairs, that inscrutable goddess has stepped in. So it happened again. For I received a cable and a letter forwarded to me from London. I did not know the writing on the letter, and I opened it curiously.

As I read my mind went back almost a year to the time I had been flying to Australia. I saw again that white, tormented girl and the crude apparatus for transfusion I had improvised. This letter was from her. It was an

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interesting report—and also it was a plea that was to be decisive for me.

Since she had been in Australia she had undergone a thorough examination and had been kept under observation by a specialist whom I had met, and whose abilities I highly respect, as do all who have met him. Her doctor in London had believed she had leukaemia, the disease which was to kill Eva Peron and perhaps change the destiny of a country. So, too, had I, though I had had no chance of making full tests. But it seemed that we were wrong. Her state had been established as purpura haemorrhagica, a disease of unknown origin that causes as a rule bleeding from and beneath the skin, though also the same kind of haemorrhage internally, when it becomes a grave danger. If she had escaped the worst, she was still by no means out of trouble. But she was determined to live, as she had been on the aeroplane, and now she had a very special reason. She had married, her husband knowing all about her condition, and she wanted to enjoy her happiness. She had been told, and correctly, that if she had a child, that might cure her. But her husband would not let her take the risk, which was indeed great.

She had learnt, so she said, that there was another and more certain treatment: removal of the spleen. She knew it was drastic, and that it involved grave risks, but she was ready to face everything. But on one condition: that I should operate. She would consent to no-one else; and her letter was a plea for me to come and see her in London. She had flown halfway round the world for that and found me gone. Her illness was growing worse, and she was afraid, she would have come to America to consult me, but she did not feel equal to it any more.

‘I know you will think me crazy,’ she wrote, ‘and you will say there are other surgeons who can operate on me. I know. But it must be you, or no-one. It was God, or fate, or destiny—I do not know in what you believe, but

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it was the power who rules us all, who saw that you were there when I so desperately needed your help last January. Now I need it again, and for better reason, my husband's sake. Do please listen to my appeal. I have faith in you and in no-one else, and as this is a serious operation I believe that faith in the surgeon is a great part of the battle. . . .

~ I laid the letter aside. There was a lump in my throat. I had been thinking of fate and its decrees, and here was a letter from a comparative stranger appealing to the same strange agency. I had the curious feeling that this was an order, and that it was beyond my power to resist. No doubt the psychologists would say that I deceived myself and that I had a driving wish that I had repressed into the unconscious and that now took this opportunity of coming out into the open for gratification: a wish to escape and to return to London and England, which perhaps were mother substitutes to me. It does not matter—the mystical fate or the equally incomprehensible mechanism of the mind. It was a plea I had to accede to: and I decided forthwith to go.

My friends at the hospital looked at me incredulously as though I had taken leave of my senses. They could not understand that anyone should voluntarily give up the bright prospects that lay before me in California. They cajoled and argued, but now at last my mind was made up. I would go—and I did not think I would return. And after a little they tried no more to persuade me. They changed their tune. They thought it would be a good thing for me, and brush away all doubts. For they could not imagine that after I had worked in California, worked with a man like Condor as my intimate associate, and been promised all I had in the way of an appointment and the certainty of wealth, that I could find England anything but distasteful. One of them—and he was a psychologist—told me that I was like a man who grieves for a lost lover

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whom, in absence, he has idealized, but when he sees her again wonders what he ever found attractive in her.

But they had their joke, too, in the midst of all their argument. They told me it was the first occasion in the whole of American surgical history that an intern of only four months' standing had been specially summoned to London to perform a difficult operation. And perhaps they had stumbled upon a truth that I barely recognized: that this appeal reinstated me as a surgeon in my own right.

The hospital itself paid me a great compliment as a parting gift. The Administrator insisted I would return, and he did not want to think that all the hard work I had done would be wasted. So he would not accept my resignation at once. He arranged for me to have three months' leave, which should still count towards the completion of my internship. But, he warned me, if I had not returned by March 31st, I should have to resign myself to starting all over again; it was beyond his power to do more.

I told myself again I was a fool to give up everything here, especially as I had such proof of their regard for me. But the attempt was half-hearted. I had to go back to England.

Because I wanted to do what I could before Christmas I went by the next available plane, leaving my wife to dispose of the house and follow later with the children by boat. So, at last, I found myself once more in England. London greeted me with a fog as though she knew of my Californian dreams. But I loved it.

My patient had not been wrong when she said she was in desperate need. She was a woman in grave danger. But I still wanted her to have another surgeon's advice. A splenectomy is a serious operation to perform, and I would rather have shared the responsibility for decision with someone else. But she was adamant. It had to be the man who had saved her before or no-one. I capitulated.

It was a worrying case. A splenectomy is at all times a difficult and risky operation; but when the patient is liable to spontaneous haemorrhage internally the risks

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become acute dangers. But I had taken it on and I could not now refuse.

She went into hospital at once. For three days she was given massive blood transfusions, and all the time I was operating blood was transfused continuously. And I was lucky. No unexpected difficulties cropped up—the expected ones were formidable enough—and I felt when at last she was wheeled away and I felt limp and exhausted that at any rate she had not died upon the table. At least part of the credit for that must go to the physician who co-operated with me, ensuring that her general condition was as good as it could be made in the circumstances.

It was still touch and go. The fight for her life had still to be waged continuously and unremittingly. In the end her faith and—shall I say it?—fate pulled her through. For a long time she would have to have frequent blood transfusions, gradually tapering off, and she could now look forward to middle or even old age. But she was content. She could enjoy a long time with her husband. Life had still not a little left to offer her.

Her husband had flown over from Australia and I met him by her bedside on the day before Christmas Eve. He was restrained but sincere in his thanks. I left them together. The hospital seemed small and mean compared with the splendours of California. Outside in the street as I went to the disreputable secondhand car I had acquired—so different from the smooth streamlined vehicles of the American streets—I found a light drizzle was falling. No doubt in California the sun was shining on the orange groves.

The comparisons did not depress me. On the next day, Christmas Eve, my wife and children would be arriving. I would meet them in the morning. I looked about me at the shabby, dripping, leafless trees, the smoke-grained façades of the buildings, still bearing the pockmarks that were the honourable scars of war, and I smiled.

It was good to be back.

Epilogue



Christmas Eve

My year of liberty had begun on New Year's Eve. It was ending on Christmas Eve. On New Year's Eve, I had decided to leave England and all it held for me—my home, my wife, my family, my practice—and surrender myself for twelve months to the world and whatever it had to offer me. And now, on Christmas Eve, everything was coming together again, just as it had been. That no-one could have expected.

I had been far and seen much. I had sought to escape and found only work and responsibilities—and found also that life without work was a dull and worthless thing. I had had visions of high success, and the visions had seemed to be materializing. Prodiggally I had thrown them away. But I did not regret it.

Great friendship had come to me—and tragedy had taken away the man who brought it. But now I knew that it was a fine thing to have known him, to have worked for him, and to have learnt from him. Perhaps I could do something towards that memorial he would like best: the continuation of his work.

But it was not quite the same now in England. I was again faced with building anew. I had no consulting-rooms. No doubt many people had forgotten me, for in a year a man's reputation may die in surgery. Still I regretted nothing.

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That morning, I had gathered my family back. And tomorrow would be Christmas Day.

In all my years in England there is one thing I have never come to understand, and that is the English neglect of Christmas Eve. To me it is one of the most solemn and exalting days of the whole year. But one's ideas of Christmas, as of nothing else, are formed for life in childhood, and I was born in a country where Christmas Eve was counted among the greatest of the festivals. It was a day on which one could celebrate the Birth of a Child which was also the birth of a new hope and a new world, and the day culminated in the great midnight service that rose to a climax with the pealing of the joyful bells. Christmas Day itself was the day of feasting and rejoicing; its Eve was the day of preparation and dedication, the day of glad expectancy of good news when one could, in spirit, share the tense anxieties and hopes of those who waited, nearly two thousand years ago, round a stable in Bethlehem.

And now, as I waited till it should be time to go with my own family to the midnight service—for that is one good habit that I have preserved from youth—I felt that it was right my year should end and at the same time my reunion with those I loved should take place upon Christmas Eve. An epoch in my life was over. A new one was dawning. It was still hazy and uncertain. I did not know what shape it would take. But here at this moment of the world's hope I could allow myself a personal hope. I knew where I could go and be welcome, where, also, there was no place for me. I had known again what it is to be humble and everyman's servant, and it had been a refining experience. I had learnt many things, good and bad, uplifting and depressing. Above all I had learnt to follow the star of my destiny, as long ago other men had followed a greater Star to a greater purpose.

And I know that as long as I believe in it as a star of service and not of self-exaltation, of truth and not of mere

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worldly gain, it will not lead me astray. It had led me back across the Atlantic from the glittering promise of a world of wealth to help someone who believed in me, and there was more reward in that than in all the wealth of the Americas.

It was time to go. Soon the bells would be ringing out their message of goodwill, of hope, of promise—and of humility. Whatever the future, so long as I can hold firmly to those things, I shall not count myself misused.